STUDY OF THE NEEDS OF UNATTACHED MEN -

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TRANSIENT AND RESIDENT

1954



1040 THE ATWATER AVENUE, MONTREAL, 25, QUEBEC

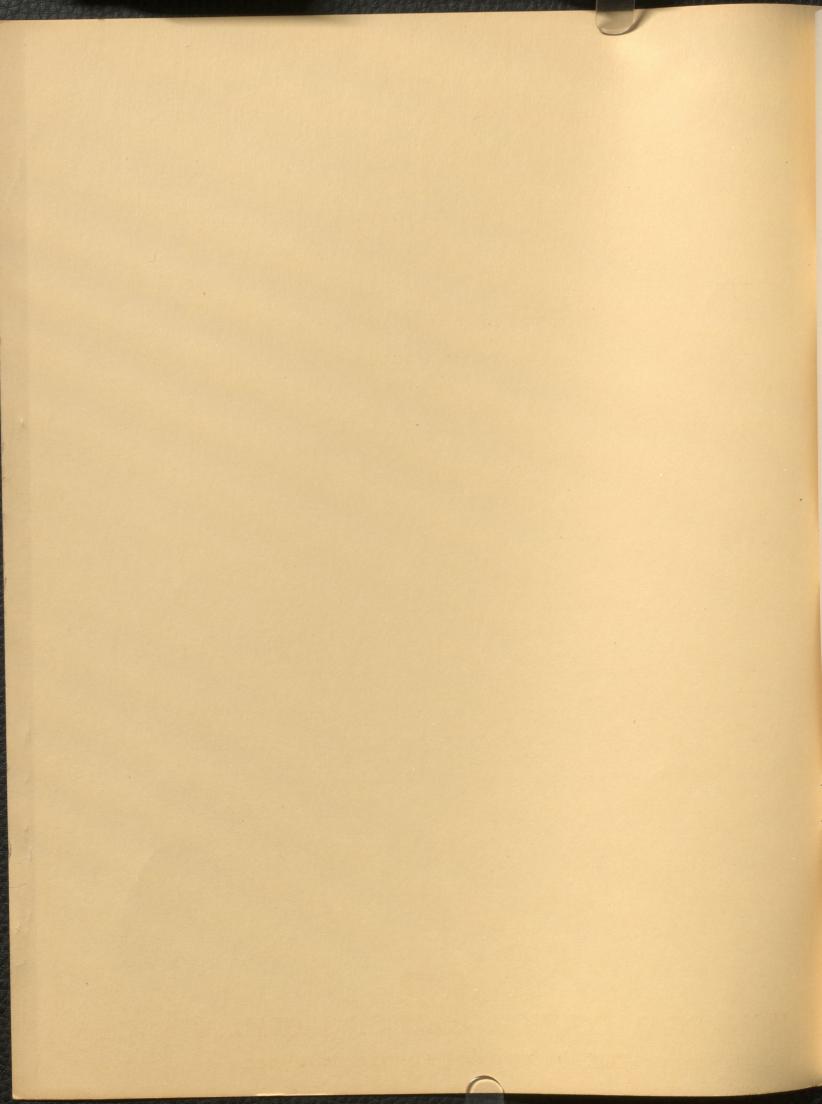


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CASE WORK SECTION

Report of Committee to Study Needs of Unattached Men -Transient and Resident

COMMITTEE

Rev. J. Harwood-Jones (Chairman)

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Miss Elinor Barnstead - Family Welfare Association Mrs. Kathleen Campbell - John Howard Society of Quebec Mrs. Gladys Fulford - Department of Veterans' Affairs Mrs. Jean Henshaw - Travellers' Aid Society Mr. D.H. White - Old Brewery Mission Mrs. G.A. Woonton - Family Welfare Association

Sub-Committee to Study Practices in Other Communities

Rev. J. Harwood-Jones (Chairman)

Mr. R.E. Binns - Department of Veterans' Affairs Miss Barbara Bishop - Montreal General Hospital Mr. A.A. McLeod - Protestant School Attendance Department Miss D. Pleming - Family Welfare Association

Neurling Refuge Family Welfare Association Department of Veterana Affairs Saron de Hirsch Institute John Howard Society of Quebeo Negro Community Centre Poppy Day Fund Hontreal General Rospitel - Social Service Department St. George's Society Travellers' Aid Society Montreal Council of Social Agencies

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CASE WORK SECTION

Report of Committee to Study Needs of Unattached Men -Transient and Resident

PURPOSE OF THE STUDY

This report is concerned with the problems, in Montreal, of men who may be either transient or resident, but who have no discernible or current ties with a family group. The study was initiated in 1951, through the Executive Committee of the Case Work Section. It was developed through a Planning Committee, which outlined three questions which needed to be answered before any decision for action could be considered:

- 1. What services are now available?
- 2. What are the difficulties in offering these services?
- 3. What gaps are there in services offered?

It was decided that information should be secured through: a) a questionnaire circulated to agencies in Montreal; b) an enquiry into what is being done in other communities. The there is and be deduced from it. The month of

The aims and objects of the study were decided on as follows:

- 1. To determine which needs are totally met or partially met in existing community agencies.
- 2. To work towards co-ordination of effort among existing agencies.
- 3. To determine what further planning is indicated.

PARTICIPATING AGENCIES

Before actually embarking on the work, representatives of organizations thought to have an interest in this phase of social welfare were called together to determine their desire to participate in such a study. No approach was made to the exclusively Roman Catholic agencies. Twenty-six groups were included in the initial discussion, as follows: elfare St. Searce's Society

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Sailor's Institute Royal Victoria Hospital - Social Service Department Welcome Hall Mission Young Men's Christian Association Salvation Army Old Brewery Mission Andrew's Home Fraser Institute United Church of Canada Irish Protestant Benevolent Society Royal Edward Laurentian Hospital Grace Dart Hospital Jewish Immigrant Aid Society

There was fairly general agreement that the men whose needs were being considered did present a variety of problems which were being met with varying degrees of adequacy or not at all. Definite interest was expressed in having the study carried out, and for the most part, cooperation was offered. There was general recognition of the problems of transiency and non-residence. Some questions and doubts were raised as to the methods to be used. It was pointed out, for instance, that there would be inevitable duplication in the statistical count. This could not be avoided because men frequently go from one agency to another for help of various kinds. It was recognized that, although a questionnaire of a statistical nature was being used, the numerical count could not be statistically accurate, but that trends could be deduced from it. The month of February 1953, was arbitrarily decided on as the sample period for the questionnaire. The questionnaire was sent out in advance, to the 26 agencies, so that records could be kept currently. Fourteen organizations returned the completed forms. However, one of these kept records for only the first ten days of the month. Two agencies, whose major responsibility is help for the group under study and who probably deal with the largest numbers in this group did not respond to the questionnaire and thus the information received was limited. Of the fourteen agencies reporting, two were public, and twelve were voluntary organizations. These agencies, and their functions, broadly speaking, are;

Religious	Andrew's Home
Medical and Psychiatric	Allan Memorial Institute
	Jewish General Hospital
	Montreal General Hospital
	Royal Victoria Hospital
Family and General Welfare	St. George's Society
	Family Welfare Association
	Baron de Hirsch Institute
Aid to Veterans	Department of Veterans Affairs
	Poppy Day Fund
Aid to Prisoners and Dependents	John Howard Society of Quebec
Public Assistance	Municipal Dept. of Social Welfare
Aid to Moving Persons	Travellers' Aid Society
Recreation	Young Men's Christian Association

FINDINGS BASED ON THE QUESTIONNAIRE

Some questions which might be raised are: Why did only 14 agencies respond to the questionnaire? How many organizations deal with surface needs only and Royal Victoria Hospital - Social Service Departmen Welcome Hall Mission Young Men's Christian Association Salvation Army Old Hrewery Mission Andrew's Home United Church of Canada United Church of Canada Irish Frotestant Benevolant Society Royal Edward Laurentian Hospital Orace Dart Hospital Jewish Immigrant Aid Society

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WINDINGS BASED ON THE QUESTIONNALHE

Some questions which night be raised are: Why did only 14 acencies respond to the questionnaire? How many organizations deal with rurface needs only and The question was raised as to the general policy of the agencies in meeting the needs of Unattached Men. From the replies, it was evident that the factor of being unattached had no significance in this regard. These individuals are treated in the same way as other applicants, i.e. eligibility is determined with reference to the function of the agency, which means that in some agencies, limits are set on one or more of the following bases:

- 1. On the basis of religion.
- 2. Non-residents pay for medical treatment, though exceptions are made.
 - 3. No help is given to transients.
 - 4. Financial aid is limited to the unemployable.
 - 5. A limit is set to the maximum amount of financial aid given.
 - 6. The individual's ability and willingness to use the service effectively is a factor.

The agencies are organized to serve men of the following ages:

	No.Agencies	No.Agencies
Age	Transient	Resident
14 years and up	only the days	of the lonth; '
16 years and up	. of all or mor	e of this ser
18 years and up	. 1	2
All ages	. 6	6
No report		de Ind.4. Thi
Total	. 13*	ers rep14 tod us

*One agency gives no aid to transients. Serves only resident adults.

The following is the actual age range of the men served. Because of the duplicated count, the table on percentages has more validity than the numerical table.

Reto	aree .	Number of Transient	Number of Resident	Percentage of Transient	Percentage of Resident
Age Range*	Total		144	23.7	2.8
18-25 years	125	81			25.6
26-45 years	558	151	1407	44.1	
	903	105	798	30.7	50.3
46-65 years		5	337	1.5	21.3
66 and over	342	. /	1586	100.0	100.0
Total Add	1928	342	1700	100.0	

*No attempt was made to secure figures for those under 18 years.

The percentages show that it is the relatively young group that is "on the move". The unattached resident men are largely middle aged and older, although the actual aged represent less than one-fourth of those studied. This is probably due to the fact that many older men are now receiving old age assistance and pensions.

An attempt was made to determine the needs of the men in relation to the service provided to them. If the needs were not being met, were the men being referred elsewhere for help? The needs are listed as follows, but information

not with underlying causes of individual difficulties?

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Need	Transient	Resident	Total
Financial: Cash and Kind	160	699	859
Medical Care	43	482	525
Psychiatric	15 15 10 h	96	111
Employment	49	216	265
Vocational Guidance	2	82	811
Personal Counselling	54	399	453
Housing: a. Custodial	for the4chron	leally1511; o	19
b. Boarding Home	(d. 14. 100	127	141
c. Nursing Home	e instilution	e othelg ben	mentiq hos
d. Institutional	on for 4ndigs	202	206
e. Overnight Shelter	49	90	139
f. Unspecified	care: gatal	69	77
Daytime Shelter	care. 24	60	84
Planned Recreation	16	135	151
Other Device Line Day centre fo	r socieg and	70	78

Only twelve of the fourteen agencies reporting are included in this count. One report was incomplete, covering only ten days of the month; the other report stated, "All our clients are in need of one or more of these services, chiefly Financial Aid, Employment and Daytime Shelter."

Only one agency is not using the Social Service Index. This is the municipal Department of Social Welfare. Some others reported using the Index with discrimination, depending on the individual case.

Referrals to other agencies were made on a planned basis by twelve of the agencies. In addition, four stated they referred on an Information-Only basis; three stated they do not refer on this basis. The resources most frequently used by the reporting agencies are, with some overlapping, classified as follows:

Nu	mber of	Resources
Resource	so Clas	sified
Family and General Welfare	6	
Hospitals, other Health	5	
Description	4	
Homes, Shelters, Hostels	9	
Aid to Veterans	3	
Aid to Prisoners	3	
Aid to Immigrants, Travellers	2	
Vocational and Employment	C.	
Other Centres, to provide shelter and	6	
	Resource Family and General Welfare Hospitals, other Health Recreation Homes, Shelters, Hostels Aid to Veterans Aid to Prisoners Aid to Immigrants, Travellers Vocational and Employment	Resourceso ClassFamily and General Welfare6Hospitals, other Health5Recreation4Homes, Shelters, Hostels9Aid to Veterans3Aid to Prisoners3Aid to Immigrants, Travellers2Vocational and Employment6

NEEDS LISTED BY THE AGENCIES

The agencies were asked to list those needs which are totally unmet, or inadequately met in existing community organizations. The results were as follows:

Financial Needs - increased relief; increased Old Age Pensions and Unemployment Insurance; aid to transient unemployed; aid as to services provided was inconclusive. (The following excludes 108 transient and 619 resident men for whom this information was not given.)

	Vocational Guidance
	d. Institutional

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Financial Meeds - inpressed relief: increased Oid And Pensions and Unemployment Insurance; aid to translent unemployed; aid to unemployed employables not eligible for unemployment insurance; emergency relief pending receipt of public assistance; more resources for clothing.

Psychiatric - more bed space in mental hospitals; immediate evaluation for the very disturbed person; more treatment facilities custodial care for emotionally disturbed and/or retarded delinquents; institutions for retarded children and adults.

Health - Institutions for the chronically ill; care for incompetent men (single, incapable of fully caring for themselves) in institutions other than mental hospitals; hospitalization for indigent alcoholics; hospitalization for indigent drug addicts; nursing home care; nutrition; convalescent care; dental care; particularly dentures; home medical care.

Planned Recreation- Day centre for social and recreational purposes for older and sick men.

Housing - Supervised boarding homes, with meals; more shelters; custodial housing; boarding homes for young men and boys, with or without meals, but with supervision.

Central Registry - for all men; from which referral can be made to proper Office agency.

 Vocational
 training programs; more special placement officers in National Employment Service for socially, physically and mentally handicapped and the aged; sheltered work shop - hobby centre; with payment for some types of work; vocational guidance; protected employment for middle aged and older men.

Case Work Service - opportunity for initial case work interview. Facilities for constructive case work service to Single Transient Men.

Of all these needs, three appear, from the questionnaire, as well as from verbal statements by those working in the field, to be outstanding. They are:

Institutions for the chronically ill. Increased psychiatric services. Day Centres, to provide shelter and recreation.

The agencies were asked for comments and suggestions as to the problems under study. Some of the replies were as follows:

One hospital reported that there was the difficulty of some agencies not accepting single men for assistance, in which case the hospital was forced to assume the agency's role.

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One hospital reported that there was the difficulty of some agencies not accepting single men for assistance, in which case the hospital was forced to assume the agency's role. In regard to establishment of a Central Intake Service: "In many instances there are basic resources in the community, but owing to lack of professional staff, lack of money, lack of beds, there is unavoidable delay in meeting the demands of the client. Often this means that the client loses touch with the agency before necessary treatment can be given. There appears to be a lack of knowledge and a lack of integration of the existing services in the community."

In order to ensure that the men get enough to eat, one statement reads, "....would regret to see action....to prevent duplication in the use of present services to transients. It has been realistically brought home to us that for a transient in deep trouble to secure shelter and sufficient food, he must be busy each day as he sleeps at one hostel, has a sandwich and warm drink there, goes to the soup kitchen on St. Hubert Street, thence to the Welcome Mission for refreshments and on to a shelter for the night, there again to receive a "hand out" of sandwich and a drink. If the hostels are filled, they have to go to police stations as long as space is available, or to sit in "corner restaurants." The men complain that they do not have time or energy left to go searching a job! Incidentally, some hostels serve food during the winter months only." It should be borne in mind that unless these men receive food on a minimum adequate level, they deteriorate physically to the point that they are unable to hold employment when it becomes available.

Another suggestion was that there is a need for dissemination of information regarding present services available.

It is interesting that little or no reference is made in the questionnaires to the problems created by residence laws. Nevertheless, it was generally recognized at the initial meeting of the Committee that lack of residence is a complicating factor in many cases.

Major issues are being tackled; for instance, homes for the chronically ill; expansion of unemployment insurance; development of psychiatric resources, staff training, etc. Can the agencies concerned profitably meet together to effect necessary changes?

THE PROBLEM IN OTHER COMMUNITIES

Information was secured from 12 cities, including London, England, cities across Canada and in the United States. According to the reports received, the two most highly organized and effective services to unattached men are to be found in London and in New York. In both cities, the government has assumed the major responsibility in meeting the problem. In England, there is statutory right to shelter, which is the responsibility of the National Assistance Board. In London, the work is co-ordinated by the Welfare Department of the London County Council, which has a consultative committee for the Homeless, consisting of representatives of private agencies and statutory bodies. There is a Welfare Office which acts as a clearing house where the homeless are interviewed by highly skilled staff and referred to the appropriate agency. There are a number of shelters in different parts of the city, as well as lodging houses for employed men. In addition, there are hostels of a slightly higher standard. There are labour homes, where selected men are accommodated, not just on a temporary basis, and where there is opportunity for constructive planning in regard to establishment of a Centrel Intake Service: "In many instances there are basic resources in the community, but owing to lack of professional staff, lack of money, lack of beds, there is anavoidable delay in meeting the demands of the client. Often this means that the client losse touch with the agency before necessary treatment can be given. There appagre to be a lack of knowledge and a lack of integration of the existing services in the community."

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In New York, the City Department of Welfare cares for about 90% of the homeless men, in three shelters varied as to purpose and function:

The Men's Shelter is the receiving centre for the care of all homeless men. It provides temporary lodging and food. Referrals to the other shelters are made through this centre, according to problems and needs.

Camp Laguardia provides longer term, semi-custodial care for men over sixty. Hart Island provides a rehabilitation service, with an individual approach including social service, medical care and a vocational program. It is hoped that a psychiatric service will also be established. Men who are brought into court on vagrancy charges have the choice of a period of rehabilitation at Hart Island, or a prison sentence. If they choose the former, the sentence is suspended and they are put "on probation" for 60-90 days at the Island.

Several cities made reference to the need for a Central Bureau or Registry, in order to co-ordinate the efforts of the various local resources working with unattached men. Such a service exists in only two of the cities from which reports were received: in Toronto, its functions - that of registration of homeless, destitute men, and co-ordination of agency services - are not being fulfilled. There is no integration other than specific arrangements which the Department of Public Welfare has made with two shelters. In London, Ontario, there is a degree of centralization being carried out through the use of the new Salvation Army hostel, where a Central Bureau for the registration of transients has been set up. The Salvation Army is a member of the Community Chest. The City makes a grant towards operating cost, but not towards relief.

Another problem that received repeated mention in the various reports was that in connection with residence laws. Since these occur on both the provincial-or-state and the municipal level, it has long been evident that there is an undeniable need for both Canadian and American Federal Governments to assume the financial responsibility for services to transients.

Lack of integration and co-ordination of services is evident through the continent in dealing with the problems of these men. Some cities provide no shelter or food during the summer months. Every city has shelters of some sort, but in most places there is realization of the unmet need for rehabilitative services. In many places, case-work services are practically non-existent for the transient group. Psychiatric services, generally available only after extensive waiting periods, are of little use in working with transients who usually must be treated immediately or not al all.

The lack of facilities for the chronically ill appears to be a very widespread problem. Need for recreational facilities and day shelter is referred to repeatedly. Hospital beds are at a premium in most communities. Housing is expensive. In general, the impression is that only stop-gap services are offered; that there is little over-all sense of responsibility for this group; that, with few exceptions, there is need for co-ordination and integration of efforts on the with the men. After the war, a new true of hostel was developed, mainly under religious auspices, some providing residential treatment, family atmosphere, with programs of rehabilitation. In all, there are at least 12 acencies in the city, dealing exclusively with Homeless can, Acparently residence laws are not a factor in this picture.

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CONCLUSIONS:

It should be re-iterated that the report is based on very limited information and the conclusions are, therefore, tentative ones only.

One of the results of this brief study has been to reveal a picture of social problems and needs which are not peculiar to the unattached man, and not very different from the general picture of the community as a whole. With a few notable exceptions, the unmet problems of the unattached men are in those areas where the community as a whole must be strengthened. Some examples of these problems, which apply both to families and to unattached men, are the unemployed employable, ineligible for unemployment insurance; the lack of institutions for the chronically ill; the need for increased psychiatric services, both diagnostic and treatment; the need for vocational services; and the need for augmented case work services.

Unattached men needing assistance may be grouped in the following categories:

- 1. The permanently unemployable, through illness or disability, physical or mental.
- 2. The temporarily unemployed, through illness, physical or mental.
- 3. The borderline unemployable, through age: lack of skill: personality difficulty: poor health: lack of employment resources: mental retardation: or a combination of such factors.
- 4. The seasonally unemployed, who do not find other employment in the off season, such as seamen, agricultural workers, lumberworkers.
- 5. Those unemployed due to lay-offs and changing business conditions,
- 6. Those on fixed low incomes, such as the Old Age Pension and
- Department of Veterans' Affairs allowances.

In cases of the unemployable, it was found that certain agencies are prepared to give a well-rounded service, within existing limitations; for the employable, services are spotty and incomplete, or almost non-existent; or there are several agencies superficially touching on the same problem. There is noticeable concern on the part of some agencies with problems related to symptomatic material needs. This results in the men being directed to several resources because there is no one single place where all their material needs are met, e.g., overnight shelter in a hostel, meals from the Canadian Red Cross, clothing from the Salvation Army, etc. It is so difficult for the men to have these needs met that they have little time or energy left to use the help offered them for working with basic causes. There is reason to believe that, at present, the maximum use is not being made of existing resources, and that there is undoubtedly duplication of both assistance and service.

Attitudes of the general public towards all unattached men tend to be negative, as the result of experiences with some of these men. This creates additional hardships for those who could really use help. Some of these attitudes include feelings that casual labourers tend to be irresponsible; hostile and punitive feelings towards the "floating" group. Are these attitudes reflected in the lack of provision for unattached men, as contrasted with programs existing in New York City and in England, where certain basic needs are recognized, accepted and met? part of those groups dealing with transfeat and housiss man.

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RECOMMENDATIONS:

It should be noted that, in the recommendations which follow, no recommendation is made for a Central Registry or Central Intake Bureau because of the peculiar welfare structure in Montreal. A central service would be invalid without established adequate resources for referral. Unless the Government took responsibility, it would be dependent on the ability and willingness of voluntary resources to make it work.

The eventual solutions to some of the problems outlined are matters of long-term planning. There are, however, certain problems which can, and should, be subjects of immediate concern.

Short Term Recommendations:

1. Although it is recognized that individual assessment should be available for all the men, it is suggested that the maximum use should be made of existing facilities; e.g., at the present time, the hostels could draw upon the services of the Travellers' Aid Society for such assessment in the case of non-resident men.

2. There should be encouragement of the efforts of other working committees, such as the current ones dealing with the problems of CHRONIC ILLNESS: ALCOHOLISM: NURSING HOME STANDARDS: BOARDING HOMES. In the case of the last mentioned, a co-ordinated effort is needed to secure such homes.

3. A Day Centre should be provided. It is appreciated that there will be difficulties in operating such a service, but it should be set up on an experimental demonstration basis, small and controllable. There is a tendency for unattached men to stay away from groups. A shelter with simple equipment but with supervision by someone able to recognize those needing and able to use help is indicated.

4. A sheltered workshop should be created, as an important service in the rehabilitation of some of these men.

Long Term Recommendations:

1. A Public Assistance Program which would include an integrated service with an individualized approach to meet financial need on a minimum adequate basis, as well as social and health needs, regardless of residence or cause of dependency. In some cases, this means a new program of assistance and services; in others, improvement of present standards.

2. Provision of individual assessment for all men asking for help.

3. Revision of Residence Laws made necessary by increased mobility of various groups in the population.

4. A program of education of the general public related to their attitudes toward unattached men. This should be focussed on problems of residence laws and other problems of being unattached. There should be some recognition of the psychological factors in being separated from family and normal community background.

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APPENDIX

MONTREAL COUNCIL OF SOCIAL AGENCIES

PLANNING COMMITTEE ON UNATTACHED MEN - TRANSIENTS AND RESIDENTS

- Definitions: Unattached Men those not living with their families; Transients those without legal residence in Greater Montreal; Residents those having legal residence in Greater Montreal (one year).
- 1. What is the general policy of your agency in meeting needs of Unattached Men?
- 2. Do you have any stated limits to assistance? ____ If so, what are they?

		Transients	Residents
	What ages of men are you organized to serve?		
4.	How many men applied to you in the following age groups,		
	in February 1953 (include those in your current case		
	loads) 18 - 25 yrs.		
	26 - 45		
	46 - 65		
	66 and over		

5.	NEEDS OF MEN IN ALL AGE GROUPS	No.	of Trans:	ient Cases	No.	of Reside	ent Cases
			Service	Referred	Service	Service	Referred
	 a) Financial Aid Cash In Kind b) Medical Care c) Psychiatric Care d) Emoloyment e) Vocational Guidance f) Personal Counselling g) Housing Accommodation Custodial Boarding Home Nursing Home Institution Overnight Shelter h) Daytime Shelter i) Planned Recreation j) Other 	Need.ed	Provided	Elsewhere	Needed	Provided	Elsewhere
6. 7. 8.	Do you use the Social Service I How do you refer men to other A a) Planned referral using b) Information-only given Give names of agencies you use	gencies; telepho to men	ne or let			No	-
9.	From your knowledge, what needs existing community organization Are there any suggestions or co	are (a) s, inclu	totally ding your	own. Lis	st in ord	ler of imp	ely in ortance.

(Please answer #9, #10 and other, if necessary on back of page)

NAME OF AGENCY

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MONTREAL COUNCIL OF SOCIAL AGENCIES

STRACISERS ON STREISRART - NEW OFFCARD NO BETTIMMOD ON INDALS

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STUDY OF THE NEEDS OF UNATTACHED MEN -

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TRANSIENT AND RESIDENT

1954



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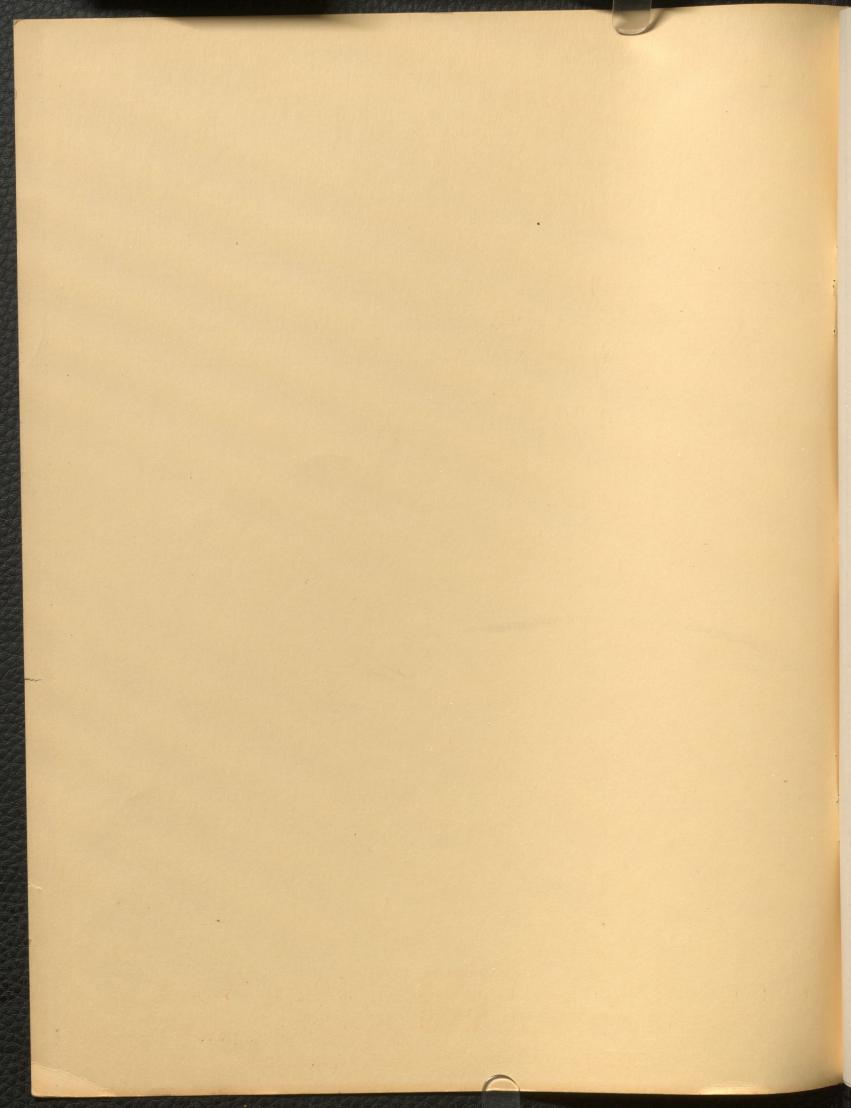


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CASE WORK SECTION

Report of Committee to Study Needs of Unattached Men -Transient and Resident

COMMITTEE

Rev. J. Harwood-Jones (Chairman)

Miss Elinor Barnstead - Family Welfare Association Mrs. Kathleen Campbell - John Howard Society of Quebec Mrs. Gladys Fulford - Department of Veterans' Affairs Mrs. Jean Henshaw - Travellers' Aid Society Mr. D.H. White - Old Brewery Mission Mrs. G.A. Woonton - Family Welfare Association

Sub-Committee to Study Practices in Other Communities

Rev. J. Harwood-Jones (Chairman)

Mr. R.E. Binns - Department of Veterans' Affairs Miss Barbara Bishop - Montreal General Hospital Mr. A.A. McLeod - Protestant School Attendance Department Miss D. Pleming - Family Welfare Association

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CASE WORK SECTION

Report of Committee to Study Needs of Unattached Men -Transient and Resident

PURPOSE OF THE STUDY

This report is concerned with the problems, in Montreal, of men who may be either transient or resident, but who have no discernible or current ties with a family group. The study was initiated in 1951, through the Executive Committee of the Case Work Section. It was developed through a Planning Committee, which outlined three questions which needed to be answered before any decision for action could be considered:

- 1. What services are now available?
- 2. What are the difficulties in offering these services?
- 3. What gaps are there in services offered?

It was decided that information should be secured through: a) a questionnaire circulated to agencies in Montreal; b) an enquiry into what is being done in other communities.

The aims and objects of the study were decided on as follows:

- 1. To determine which needs are totally met or partially met in existing community agencies. 2. To work towards co-ordination of effort among existing agencies.
- 3. To determine what further planning is indicated.

PARTICIPATING AGENCIES

Before actually embarking on the work, representatives of organizations thought to have an interest in this phase of social welfare were called together to determine their desire to participate in such a study. No approach was made to the exclusively Roman Catholic agencies. Twenty-six groups were included in the initial discussion, as follows:

St. Andrew's Society City of Montreal - Department of Social Welfare Meurling Refuge Family Welfare Association Department of Veterans Affairs Baron de Hirsch Institute John Howard Society of Quebec Negro Community Centre Poppy Day Fund Montreal General Hospital - Social Service Department St. George's Society Travellers' Aid Society Montreal Council of Social Agencies

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Sailor's Institute Royal Victoria Hospital - Social Service Department Welcome Hall Mission Young Men's Christian Association Salvation Army Old Brewery Mission Andrew's Home Fraser Institute United Church of Canada Irish Protestant Benevolent Society Royal Edward Laurentian Hospital Grace Dart Hospital Jewish Immigrant Aid Society

There was fairly general agreement that the men whose needs were being considered did present a variety of problems which were being met with varying degrees of adequacy or not at all. Definite interest was expressed in having the study carried out, and for the most part, cooperation was offered. There was general recognition of the problems of transiency and non-residence. Some questions and doubts were raised as to the methods to be used. It was pointed out, for instance, that there would be inevitable duplication in the statistical count. This could not be avoided because men frequently go from one agency to another for help of various kinds. It was recognized that, although a questionnaire of a statistical nature was being used, the numerical count could not be statistically accurate, but that trends could be deduced from it. The month of February 1953, was arbitrarily decided on as the sample period for the questionnaire. The questionnaire was sent out in advance, to the 26 agencies, so that records could be kept currently. Fourteen organizations returned the completed forms. However, one of these kept records for only the first ten days of the month. Two agencies, whose major responsibility is help for the group under study and who probably deal with the largest numbers in this group did not respond to the questionnaire and thus the information received was limited. Of the fourteen agencies reporting, two were public, and twelve were voluntary organizations. These agencies, and their functions, broadly speaking, are:

Religio	us	Andrew's Home
Medical	and Psychiatric	Allan Memorial Institute
		Jewish General Hospital
		Montreal General Hospital
		Royal Victoria Hospital
Family	and General Welfare	St. George's Society
		Family Welfare Association
		Baron de Hirsch Institute
Aid to	Veterans	Department of Veterans Affairs
		Poppy Day Fund
Aid to	Prisoners and Dependents	John Howard Society of Quebec
Public	Assistance	Municipal Dept. of Social Welfare
Aid to	Moving Persons	
		Young Men's Christian Association

FINDINGS BASED ON THE QUESTIONNAIRE

Some questions which might be raised are: Why did only 14 agencies respond to the questionnaire? How many organizations deal with surface needs only and Royal Victoria Heavital - Social Service Departmen Welcome Hall Mission Young Men's Christian Arsociation Salvation Army Old Brewery Mission Andrew's Home Traser Institute United Church of Canada United Church of Canada Frish Protestant Benevolent Society Royal Edward Laurentian Rospital Grace Dart Hospital Grace Dart Hospital

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The question was raised as to the general policy of the agencies in meeting the needs of Unattached Men. From the replies, it was evident that the factor of being unattached had no significance in this regard. These individuals are treated in the same way as other applicants, i.e. eligibility is determined with reference to the function of the agency, which means that in some agencies, limits are set on one or more of the following bases:

- 1. On the basis of religion.
- 2. Non-residents pay for medical treatment, though exceptions are made.
 - 3. No help is given to transients.
 - 4. Financial aid is limited to the unemployable.
 - A limit is set to the maximum amount of financial aid given.
 The individual's ability and willingness to use the service
 - effectively is a factor.

The agencies are organized to serve men of the following ages:

	No.Agencies	No. Agencies		
Age of the fourteen as	Transient	Resident		
14 years and up		of the leath:		
16 years and up		e of tiles se		
18 years and up	1	2		
All ages		6		
No report		4		
Total	13*	14		

*One agency gives no aid to transients. Serves only resident adults.

a this count.

The following is the actual age range of the men served. Because of the duplicated count, the table on percentages has more validity than the numerical table.

		Number of	Number of	Percentage of	Percentage of
Age Range*	Total	Transient	Resident	Transient	Resident
18-25 years	125	81	7171	23.7	2.8
26-45 years	558	151	1407	44.1	25.6
46-65 years	903	105	798	30.7	50.3
66 and over	342	5	337	1.5	21.3
Total	1928	342	1586	100.0	100.0

*No attempt was made to secure figures for those under 18 years.

The percentages show that it is the relatively young group that is "on the move". The unattached resident men are largely middle aged and older, although the actual aged represent less than one-fourth of those studied. This is probably due to the fact that many older men are now receiving old age assistance and pensions.

An attempt was made to determine the needs of the men in relation to the service provided to them. If the needs were not being met, were the men being referred elsewhere for help? The needs are listed as follows, but information

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An attempt was made to determine the needs of the men in relation to the service provided to them. If the needs were not being met, were the men being referred elsewhere for help? The needs are listed as follows, but information as to services provided was inconclusive. (The following excludes 108 transient and 619 resident men for whom this information was not given.)

Need	Transient	Resident	Total
Financial: Cash and Kind	160	699	859
Medical Care	43	482	
Psychiatric custodial care	for 15ction	96	ili
Employment	netit4910ne	216	265
Vocational Guidance	2	82	gli
Personal Counselling	54	399	453
Financial: Cash and Kind160699859Medical Care43482525Psychiatric1596111Employment49216265Vocational Guidance28284			
b. Boarding Home	(singly, inc	127	141
c. Nursing Home	. instilution	a dia 1g bea	19
d. Institutional	a for 4ndige	202	206
e. Overnight Shelter	49	90	139
f. Unspecified	are: gotal	69	77
Daytime Shelter	24	60	84
Planned Recreation	16	135	151
Other	socieg and	70 001	78

Only twelve of the fourteen agencies reporting are included in this count. One report was incomplete, covering only ten days of the month; the other report stated, "All our clients are in need of one or more of these services, chiefly Financial Aid, Employment and Daytime Shelter."

Only one agency is not using the Social Service Index. This is the municipal Department of Social Welfare. Some others reported using the Index with discrimination, depending on the individual case.

Referrals to other agencies were made on a planned basis by twelve of the agencies. In addition, four stated they referred on an Information-Only basis; three stated they do not refer on this basis. The resources most frequently used by the reporting agencies are, with some overlapping, classified as follows:

Resource so Classified	
Family and General Welfare 6	8017
Hospitals, other Health 5	
Recreation 4	
Homes, Shelters, Hostels 9	
Aid to Veterans 3	
Aid to Prisoners 3	
Aid to Immigrants, Travellers 2	
Vocational and Employment 2	
Other Contres, to provide shelter and rect 6 100.	

NEEDS LISTED BY THE AGENCIES

The agencies were asked to list those needs which are totally unmet, or inadequately met in existing community organizations. The results were as follows:

Financial Needs - increased relief; increased Old Age Pensions and Unemployment Insurance; aid to transient unemployed; aid as to services provided was inconclusive. (The following evolutes 108 transient and 619 resident men for whom this information was not riven.)

	Financial; Cach and Kind
	Psychiatric
	Employment was an area of a constant
	Daytime Shelter
	Planned Recreation

Only twelve of the fourteen agencies reporting are included in this count. One report was incomplete, covering only ten days of the month: the other report stated. "All our clients are in need of one or more of these services, chiefly Financial Aid, Employment and Daytime Shelter."

Only one egency is not using the Social Service Index. This is the municipal Department of Social Welfare. Some others reported using the Index with discrimination, depending on the individual case.

Referrals to other agencies were made on a planned basis by twelve of the agencies. In addition, four stated they referred on an Information-Only basis; three stated they do not refer on this basis. The recources most frequently used by the reporting agencies are, with some overlapping of classified as follows;

Resource
Homes, Shelters, Hostels
Aid to Veterane
Aid to Immigrants, Travellers

NEEDS LISTED BY THE AGENCIES

The agencies were asked to list those needs which are totally unmet, or inadequately met in existing community organizations. The results were as follows:

Financial Needs - increased relief; increased Old Age Pensions and Unemployment Insurance; aid to transient unemployed; aid to unemployed employables not eligible for unemployment insurance; emergency relief pending receipt of public assistance; more resources for clothing.

Psychiatric - more bed space in mental hospitals; immediate evaluation for the very disturbed person; more treatment facilities custodial care for emotionally disturbed and/or retarded delinquents; institutions for retarded children and adults.

Health - Institutions for the chronically ill; care for incompetent men (single, incapable of fully caring for themselves) in institutions other than mental hospitals; hospitalization for indigent alcoholics; hospitalization for indigent drug addicts; nursing home care; nutrition; convalescent care; dental care; particularly dentures; home medical care.

Planned Recreation- Day centre for social and recreational purposes for older and sick men.

Housing - Supervised boarding homes, with meals; more shelters; custodial housing; boarding homes for young men and boys, with or without meals, but with supervision.

Central Registry - for all men; from which referral can be made to proper Office agency.

Vocational - training programs; more special placement officers in National Employment Service for socially, physically and mentally handicapped and the aged; sheltered work shop - hobby centre; with payment for some types of work; vocational guidance; protected employment for middle aged and older men.

Case Work Service - opportunity for initial case work interview. Facilities for constructive case work service to Single Transient Men.

Of all these needs, three appear, from the questionnaire, as well as from verbal statements by those working in the field, to be outstanding. They are:

Institutions for the chronically ill. Increased psychiatric services. Day Centres, to provide shelter and recreation.

The agencies were asked for comments and suggestions as to the problems under study. Some of the replies were as follows:

One hospital reported that there was the difficulty of some agencies not accepting single men for assistance, in which case the hospital was forced to assume the agency's role.

Of all these needs, three appear, from the questionnaire, as well as from verbal statements by those working in the field, to be outstanding. They are:

Institutions for the chronically ill. Increased psychiatric services. Day Centres, to provide shelter and recreation

The agencies were asked for comments and suggestions as to the problems under study. Some of the replies were as follows:

One hospital reported that there was the difficulty of some agencies not accepting single men for assistance, in which case the hospital was forced to assume the agency's role. In regard to establishment of a Central Intake Service: "In many instances there are basic resources in the community, but owing to lack of professional staff, lack of money, lack of beds, there is unavoidable delay in meeting the demands of the client. Often this means that the client loses touch with the agency before necessary treatment can be given. There appears to be a lack of knowledge and a lack of integration of the existing services in the community."

In order to ensure that the men get enough to eat, one statement reads, "....would regret to see action....to prevent duplication in the use of present services to transients. It has been realistically brought home to us that for a transient in deep trouble to secure shelter and sufficient food, he must be busy each day as he sleeps at one hostel, has a sandwich and warm drink there, goes to the soup kitchen on St. Hubert Street, thence to the Welcome Mission for refreshments and on to a shelter for the night, there again to receive a "hand out" of sandwich and a drink. If the hostels are filled, they have to go to police stations as long as space is available, or to sit in "corner restaurants." The men complain that they do not have time or energy left to go searching a job! Incidentally, some hostels serve food during the winter months only." It should be borne in mind that unless these men receive food on a minimum adequate level, they deteriorate physically to the point that they are unable to hold employment when it becomes available.

Another suggestion was that there is a need for dissemination of information regarding present services available.

It is interesting that little or no reference is made in the questionnaires to the problems created by residence laws. Nevertheless, it was generally recognized at the initial meeting of the Committee that lack of residence is a complicating factor in many cases.

Major issues are being tackled; for instance, homes for the chronically ill; expansion of unemployment insurance; development of psychiatric resources, staff training, etc. Can the agencies concerned profitably meet together to effect necessary changes?

THE PROBLEM IN OTHER COMMUNITIES

Information was secured from 12 cities, including London, England, cities across Canada and in the United States. According to the reports received, the two most highly organized and effective services to unattached men are to be found in London and in New York. In both cities, the government has assumed the major responsibility in meeting the problem. In England, there is statutory right to shelter, which is the responsibility of the National Assistance Board. In London, the work is co-ordinated by the Welfare Department of the London County Council, which has a consultative committee for the Homeless, consisting of representatives of private agencies and statutory bodies. There is a Welfare Office which acts as a clearing house where the homeless are interviewed by highly skilled staff and referred to the appropriate agency. There are a number of shelters in different parts of the city, as well as lodging houses for employed men. In addition, there are hostels of a slightly higher standard. There are labour homes, where selected men are accommodated, not just on a temporary basis, and where there is opportunity for constructive planning in regard to establishment of a Gentral Inteke Service: "In many instances there are basic resources in the community, but oving to lack of orofessional staff, lack of money, lack of beds, there is unavoidable delay in meeting the demands of the client. Often this means that the client loses touch with the agency before necessary treatment can be given. There showare to be a lack of knowledge and a lack of integration of the existing services in the community."

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In New York, the City Department of Welfare cares for about 90% of the homeless men, in three shelters varied as to purpose and function:

The Men's Shelter is the receiving centre for the care of all homeless men. It provides temporary lodging and food. Referrals to the other shelters are made through this centre, according to problems and needs.

Camp Laguardia provides longer term, semi-custodial care for men over sixty. Hart Island provides a rehabilitation service, with an individual approach including social service, medical care and a vocational program. It is hoped that a psychiatric service will also be established. Men who are brought into court on vagrancy charges have the choice of a period of rehabilitation at Hart Island, or a prison sentence. If they choose the former, the sentence is suspended and they are put "on probation" for 60-90 days at the Island.

Several cities made reference to the need for a Central Bureau or Registry, in order to co-ordinate the efforts of the various local resources working with unattached men. Such a service exists in only two of the cities from which reports were received: in Toronto, its functions - that of registration of homeless, destitute men, and co-ordination of agency services - are not being fulfilled. There is no integration other than specific arrangements which the Department of Public Welfare has made with two shelters. In London, Ontario, there is a degree of centralization being carried out through the use of the new Salvation Army hostel, where a Central Bureau for the registration of transients has been set up. The Salvation Army is a member of the Community Chest. The City makes a grant towards operating cost, but not towards relief.

Another problem that received repeated mention in the various reports was that in connection with residence laws. Since these occur on both the provincial-or-state and the municipal level, it has long been evident that there is an undeniable need for both Canadian and American Federal Governments to assume the financial responsibility for services to transients.

Lack of integration and co-ordination of services is evident through the continent in dealing with the problems of these men. Some cities provide no shelter or food during the summer months. Every city has shelters of some sort, but in most places there is realization of the unmet need for rehabilitative services. In many places, case-work services are practically non-existent for the transient group. Psychiatric services, generally available only after extensive waiting periods, are of little use in working with transients who usually must be treated immediately or not al all.

The lack of facilities for the chronically ill appears to be a very widespread problem. Need for recreational facilities and day shelter is referred to repeatedly. Hospital beds are at a premium in most communities. Housing is expensive. In general, the impression is that only stop-gap services are offered; that there is little over-all sense of responsibility for this group; that, with few exceptions, there is need for co-ordination and integration of efforts on the Ith the men. After the war, a new type of hostel was developed, mainly under eligious auspices, some providing residential treatment, family strogghere, with rograms of rehabilitation. In all, there are at least 12 agencies in the city, caling exclusively with homeless men. Accurcity residence laws are not a actor in this picture.

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part of those groups dealing with transient and homeless men.

CONCLUSIONS:

It should be re-iterated that the report is based on very limited information and the conclusions are, therefore, tentative ones only.

One of the results of this brief study has been to reveal a picture of social problems and needs which are not peculiar to the unattached man, and not very different from the general picture of the community as a whole. With a few notable exceptions, the unmet problems of the unattached men are in those areas where the community as a whole must be strengthened. Some examples of these problems, which apply both to families and to unattached men, are the unemployed employable, ineligible for unemployment insurance; the lack of institutions for the chronically ill; the need for increased psychiatric services, both diagnostic and treatment; the need for vocational services; and the need for augmented case work services.

Unattached men needing assistance may be grouped in the following categories:

- 1. The permanently unemployable, through illness or disability, physical or mental.
- 2. The temporarily unemployed, through illness, physical or mental.
 - 3. The borderline unemployable, through age: lack of skill: personality difficulty: poor health: lack of employment resources: mental retardation: or a combination of such factors.
- 4. The seasonally unemployed, who do not find other employment in the off season, such as seamen, agricultural workers, lumberworkers.
 - 5. Those unemployed due to lay-offs and changing business conditions.
- 6. Those on fixed low incomes, such as the Old Age Pension and Department of Veterans' Affairs allowances.

In cases of the unemployable, it was found that certain agencies are prepared to give a well-rounded service, within existing limitations; for the employable, services are spotty and incomplete, or almost non-existent; or there are several agencies superficially touching on the same problem. There is noticeable concern on the part of some agencies with problems related to symptomatic material needs. This results in the men being directed to several resources because there is no one single place where all their material needs are met, e.g., overnight shelter in a hostel, meals from the Canadian Red Cross, clothing from the Salvation Army, etc. It is so difficult for the men to have these needs met that they have little time or energy left to use the help offered them for working with basic causes. There is reason to believe that, at present, the maximum use is not being made of existing resources, and that there is undoubtedly duplication of both assistance and service.

Attitudes of the general public towards all unattached men tend to be negative, as the result of experiences with some of these men. This creates additional hardships for those who could really use help. Some of these attitudes include feelings that casual labourers tend to be irresponsible; hostile and punitive feelings towards the "floating" group. Are these attitudes reflected in the lack of provision for unattached men, as contrasted with programs existing in New York City and in England, where certain basic needs are recognized, accepted and met? ted are lemon one implement dily galled among second to ital

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RECOMMENDATIONS:

It should be noted that, in the recommendations which follow, no recommendation is made for a Central Registry or Central Intake Bureau because of the peculiar welfare structure in Montreal. A central service would be invalid without established adequate resources for referral. Unless the Government took responsibility, it would be dependent on the ability and willingness of voluntary resources to make it work.

The eventual solutions to some of the problems outlined are matters of long-term planning. There are, however, certain problems which can, and should, be subjects of immediate concern.

Short Term Recommendations:

1. Although it is recognized that individual assessment should be available for all the men, it is suggested that the maximum use should be made of existing facilities; e.g., at the present time, the hostels could draw upon the services of the Travellers' Aid Society for such assessment in the case of non-resident men.

2. There should be encouragement of the efforts of other working committees, such as the current ones dealing with the problems of CHRONIC ILLNESS: ALCOHOLISM: NURSING HOME STANDARDS: BOARDING HOMES. In the case of the last mentioned, a co-ordinated effort is needed to secure such homes.

3. A Day Centre should be provided. It is appreciated that there will be difficulties in operating such a service, but it should be set up on an experimental demonstration basis, small and controllable. There is a tendency for unattached men to stay away from groups. A shelter with simple equipment but with supervision by someone able to recognize those needing and able to use help is indicated.

4. A sheltered workshop should be created, as an important service in the rehabilitation of some of these men.

Long Term Recommendations:

1. A Public Assistance Program which would include an integrated service with an individualized approach to meet financial need on a minimum adequate basis, as well as social and health needs, regardless of residence or cause of dependency. In some cases, this means a new program of assistance and services; in others, improvement of present standards.

2. Provision of individual assessment for all men asking for help.

3. Revision of Residence Laws made necessary by increased mobility of various groups in the population.

4. A program of education of the general public related to their attitudes toward unattached men. This should be focussed on problems of residence laws and other problems of being unattached. There should be some recognition of the psychological factors in being separated from family and normal community background.

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APPENDIX

MONTREAL COUNCIL OF SOCIAL AGENCIES

PLANNING COMMITTEE ON UNATTACHED MEN - TRANSIENTS AND RESIDENTS

Definitions: Unattached Men - those not living with their families; Transients - those without legal residence in Greater Montreal; <u>Residents</u> - those having legal residence in Greater Montreal (one year).

- 1. What is the general policy of your agency in meeting needs of Unattached Men?
- 2. Do you have any stated limits to assistance? ____ If so, what are they? _____

		Transients	Residents
3.	What ages of men are you organized to serve?		
4.	How many men applied to you in the following age groups,		
	in February 1953 (include those in your current case		
	loads) 18 - 25 yrs.		
	26 - 45		
	46 - 65		
	66 and over		

5.	NEEDS OF MEN IN ALL AGE GROUPS			ient Cases			
				Referred Elsewhere			
	 a) Financial Aid Cash In Kind b) Medical Care c) Psychiatric Care d) Employment e) Vocational Guidance f) Personal Counselling g) Housing Accommodation Custodial Boarding Home Nursing Home Institution Overnight Shelter h) Daytime Shelter i) Planned Recreation 			<u>Bilsewhere</u>		Provided	Elsewhere
6. 7.	 j) Other Do you use the Social Service I How do you refer men to other A a) Planned referral using b) Information-only given Give names of agencies you use 	Agencies' g telepho n to men	one cr let	tter	Yes	No	
8.	Give names of agencies you use	MOSC II.	equercry				
9.	From your knowledge, what needs existing community organization	s are (a ns, inclu) totally iding your	unmet, or own. Lis	(b) met st in ord	inadequat ler of imp	ely in ortance.
10.	Are there any suggestions or co	omments ;	vou vish t	to make to	the Comm	nittee?	
	(Please answer #9, #10 a	and other	r, if nece	essary on 1	back of p	page)	

NAME OF AGENCY _

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MONTREAL COUNCIL OF SOCIAL ADENCIES

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to you have any stated limits to assistance? If so, what are they?

Do you use the Social Service Index?

How do you releared using the selected or latter Yes No b) Flanned referral using the men Yes No b) Information-only given to men Yes No dive names of scencies you use most frequently?

. From your knowledge, what needs are (a) totally unmet, or (b) met inadequately in estating community pressinger, including your own. List in order of incortance.

A see these any expressions of comments you wish to make to the Committee?

(bisses anever 49, 410 and other, 11 necessary on back of page)