responsive and somewhat over affectionate and demonstrative. She talked constantly in a shrill voice and laughed and sang to herself. She was quite jerky and showed considerable erratic behavior. The examination again showed that she was probably a mental defective with some psychotic symptoms, and because of this, should be kept under careful supervision. She is not promising enough to warrant the recommendation of a boarding home placement since there is so little money available for this, and therefore the psychologists believed that care in an institution with children is the most practical plan. It may be necessary to commit her to the Colony for Feeble-Minded at some later date. Her behavior showed peculiarities which can not be explained solely on the basis of mental deficiency. She presented an essentially normal physical examination except for a small, poorly formed head.

About a year later Rosalie was again examined at the Children's Memorial Clinic. She presented an essentially normal general physical examination again except for her small head. At this time her performance was rather uneven. She was nine years and five months old and scored a mental age of seven years and three months, Intelligence Quotient 69. She was unable to repeat four digits, so could not pass all tests on age four. The only failure at the mental age level was repeating syllables. Above the mental age level she succeeded in giving the number
of fingers, describing pictures, tying a bow knot, giving contrasts for year seven, and defining words superior to use at the eight year level. None of the nine year tests were passed. On the performance test she obtained a median mental age of six years and six months. The results of this examination, like those of previous examinations, indicate that Rosalie is of high grade defective intelligence. So far she seems to be responding very well to the institutional regime, and this is probably the type of situation in which she can be expected to make the most satisfactory adjustment.

Now Rosalie’s mother, Nora, is married to Mr. Samuel Brooks and lives in Richmond. Her husband does not know of the existence of Rosalie and Nora refuses to have anything to do with the child. Both Nora and her husband work and Nora claims that she can not afford to pay any money toward Rosalie’s support in a boarding home.

Rosalie will probably stay at the City Home until she is ten years old and then will be sent to the Colony for Feeble-Minded.

Case No. 4. "Elnora"

Elnora is a little albino negro girl eight years old who came to the City Home when she was four years old, an apparently hopeless cripple who could not walk at all, but could only crawl and drag herself along with her hands.
Her father is unknown and her mother, Annie, is a patient in the Central State Hospital for the Insane, a victim of manic depressive psychosis. She has a brother, Jack, who is three years younger than Elnora. When the children's mother was sent to the Central State Hospital, they were cared for by their maternal grandmother, Millie Lee. All of Millie's three children, except Annie, have been known to the Juvenile Court. Louise, the eldest child, was convicted of shop-lifting and thought to be promiscuous. Sam, the second child, was convicted also of shop-lifting. Both Louise and Sam are thought to be feeble-minded.

When Elnora was four years old, her grandmother left her together with her brother Jack with a neighbor for temporary care. She came back and got Jack after a few days but never came back for Elnora. The neighbor took care of Elnora for three months and bought her some leg braces. Then the neighbor became ill and could care for Elnora no longer so she was put in the City Home by the Juvenile Court.

The grandmother was finally located in Library, Pennsylvania where she was keeping a boarding house. She claimed to be unable to support Elnora and so Elnora was committed by the court to the Children's Aid Society. Since her physical condition was such as to render her a definitely unplaceable child, she remained in the City Home.

Soon after she arrived at the City Home, Elnora was referred to the Children's Memorial Clinic for an examination. Her physical examination showed a positive Wasserman
test. She had had poliomyelitis and the paralysis involved both lower extremities but more marked on the right than on the left. There was considerable atrophy of the muscles with an extreme inversion of the right foot. The psychologist's examination showed that she passed all the two year tests and several tests in three. She was quite lively and responsive during the tests.

When Elnora was five years old she was referred to the clinic for re-examination. The psychological test indicated a retardation in her intellectual development of about two and one half years. Her mental age was almost the same as at the time of the previous examination. All during the examination she sat in a stolid, expressionless sort of apathy. She paid no attention to toys and showed no interest in what went on around her. Her answers to questions were unintelligible grunts. Her failures seemed to be the result of a lack of comprehension rather than any willful refusal to cooperate. Even with the nurse, whom she knew and liked, she showed no improvement in the grasp of the material presented to her.

At the age of six years, Elnora underwent a series of orthopedic operations performed by Doctor Wheeldon with the result that she can now walk fairly well with the aid of a cane.

When she was eight years old, Elnora was again referred to the Children's Memorial Clinic. She has a complete paralysis of the left leg so that she is primarily an orthopedic problem and placing her where she
can be supervised by an orthopedic surgeon is the principal indication since it will be necessary for her to attend an orthopedic clinic regularly at long intervals. During this examination the child showed no spontaneity. She talked in a low tone of voice and looked often at the nurse who was present during the examination. On the Stanford-Binet tests she obtained a mental age of three years, ten months, Intelligence Quotient 52. The nurses at the City Home believe Elnora's mentality will show an improvement as her physical condition improves. She can now say her "A B C's" recite several poems and sing some popular songs which she has been taught. If she could be sent to kindergarten it is thought by those familiar with the case that she would improve still more than she already has.
CHAPTER SIX

CONCLUSIONS AND RECOMMENDATIONS

All the children in the City Home during the period of time over which this study was extended have been described in detail in this study. It has been found that children are placed in the City Home only when no other disposition of them can be made by the agencies assuming their cases.

Causative factors which lead to placement of children in the City Home have been found to be as follows:

1. Poverty among the parents of the children. This accounts for the transient families stranded at the City Home; the children of the unemployed sent to the City Home; mothers of children being at the City Home whose fathers were in jail; children being born at the City Home because their parents could afford no other care.

2. Neglect by parents or relatives.

3. Mental deficiency of children.

4. Abandonment by parents or relatives.

5. The policy of the city of referring foundlings to the City Home.
6. Physical conditions of the children in some cases which prevents any placement other than in the City Home.

7. Family situations involving the child as Juvenile Court trials with separation of mother and child pending.

The factors contributing to the removal of those cases from the City Home which occurred during the period of study were analyzed and found as follows:

1. The parents or relatives were found to be able to care for their children.

2. The feeble-minded colony was in a position to admit some of the children already committed to its care.

3. The Traveller's Aid Society was able to adjust the cases of some children at the City Home.

4. The Children's Aid Society was successful in placing a foundling for adoption.

5. Acceptance by the Foundling Hospital of a white foundling, the only such case which happened to occur during the study.

6. Death.

The factors which prevented any removal of the cases which remained at the end of this study were found as follows:
1. Over-crowded conditions in the institutions which should be caring for the child.

2. Financial crisis which hinders new plans being made to supplant the present policy of the social agencies of using the City Home as a temporary convenience.

3. Present policy of the city and social agencies regarding defective children.

4. Family situations which complicate the child's problem.

5. The present large demands made on the Family Service Society, the Social Service Bureau, and the Bureau of Catholic Charities which prevent their being able to give sufficient relief for the care of some of the more difficult and involved families of the children in the City Home.

Today it is generally conceded that life in a mixed almshouse is a survival of outworn attitudes towards the care of dependent children.

"Almshouse experiences are not what we who read of the number of children there would choose for children whom we personally love. The effect of these experiences is not less harmful to the children concerned because we who read do not personally know them.

"It would be of interest to know how many persons in the United States and in each of our several States realize the magnitude and the persistence
of the problem of almshouse children in the United States as the second quarter of the twentieth century opens." (1)

Yet the almshouse as a home for these children is still sanctioned in most states. In the state of Virginia the law does not forbid almshouse care for children. However, in regard to delinquent children the law reads as follows:

"No child shall be held in any almshouse longer than thirty days without the consent of the State Department of Public Welfare." (2)

There are five suggestions which have been made for possible ways for removing children from the City Home. These suggestions have been made by various interested persons who are familiar with the problem.

The first, the opinion of Mr. Thomas B. Morton, is for the City of Richmond to provide a separate institution for these children. A study of the history of the City Home has shown that there have always been children there. According to Mr. Thomas B. Morton, the present superintendent, there always will be children in the City Home until the City of Richmond is willing to go to the expense of building a special institution which may be used as a home for social agencies to unload children whose

cases they cannot assume at the time. Such an institution, if the cost could be met, while being a great improvement on the present situation, would be far from ideal and would not solve the real problems of the children involved.

The second suggestion for a way to remove children from the City Home is to place them in boarding homes recommended by the child-placing agencies under adequate supervision, either by a child-placing agency or by the social worker at the City Home.

"A boarding home is a normal family home where the foster parents are actuated primarily by a desire to be of service to children in need, but are unwilling or unable to assume the greater responsibilities expected of and involved in free home care. Boarding children is not a profitable undertaking and homes where the financial motive is primary are generally not used by the better case work agencies. Boarding homes are best fitted to serve:

1. Infants -- for temporary or permanent care.

2. Normal or average children -- definitely needing such care after taking account of the physical, psychological, and vocational factors involved.

3. Children deviating somewhat from normal health, mentality or conduct.

"To illustrate, children between the ages of five and twelve are too old for adoptive homes generally, and yet not old enough to provide sufficiently for themselves by the way of services performed. Children deviating from the normal, either in mentality or behavior are certainly not eligible for free home placement.

This leaves for the free home:

1. Full orphans, or those children for whom family ties need or should not be preserved, and are presumably for adoption.
2. Reasonably normal adolescents able to earn partial or full support without endangering health, vocational development and emotional balance.

3. Such children as can suitably be cared for free in the same home that formerly required some compensation.

"A large majority of families willing or desirous of taking children free fall into four groups:

1. Those having no children of their own who want a child to love, protect and rear as their own -- to be proud of. This is the most satisfactory free foster home. It is suitable, however, for children mentally and physically normal or superior, between the ages of six months and four years.

2. Those who want children for services to be performed and the contribution to the family as an economic and social unit which the child can make.

3. Couples past middle age whose own children are grown, who feel in need of the substituting of other children to compensate for loneliness.

4. Those activated primarily by humanitarian and charitable desires, and who prefer to make their contribution to charitable and social work in general in this way.

"Present economic conditions have brought about a marked decline in the total of free homes available. The majority of applications now come from the first group of families. These are high type homes and families where the agencies are limited to the smallest number of dependent children in need. Applications from the other three groups have declined markedly and a considerable number of such homes into which children went in the past now require full or partial subsidy in the way of clothing, school books, medical attention, and other incidentals. Funds are not available to the private agencies for the boarding home care of such large numbers of children, and there are large numbers in very great need and are not receiving care. Of course, they are in considerable measure children deviating somewhat from normal but children who can and should profit by family life which can be had only in boarding homes."
"In Virginia, fifty-five per cent of all children in care are in institutions, only four per cent in boarding homes, and forty-one per cent in free homes. When public service is not measurably present, the institutions and agencies have the tendency to select carefully those whom they will aid. Important as it otherwise is, the inadequacies of public or tax supported service in Virginia and other Southern States have certain important results of which the narrow base of the present service is the most notable. Financial resources must be stretched as far as possible so boarding home care often a new form to be organized, can rarely be resorted to, and institutional care, usually in existence; and free home care are over-emphasized even when the best interests of the child may not be met in this way.

"It is then amply demonstrated:

1. That private agencies can secure funds to give care to only a small percentage (The median for thirty-one states is twenty-four children in private care, to seventy-six children in public care,) of the children who are dependent and require care either in their own or other homes if they are to have a fair chance.

2. That not until government, state or municipal, assumes its rightful place and responsibility in child-caring; will all, or even a majority, of those children in need have even the minimum opportunity which is the rightful heritage of all children." (3).

This plan of boarding the children in homes suited to their needs, adequately supervised, would most probably be the ideal solution of the problem which the children in the City Home present. However, it is impracticable under present conditions, namely, the organizations of the children's agencies at the present time, the difficulty of

adequate supervision, and lack of funds to carry out the plan.

"It would seem then a question of whether we are sufficiently desirous of safe-guarding the future of society by taking measures which might conceivably reduce the cost of providing court action and incarceration for those convicted of crime by possibly the full amount of the bill. This takes into no account the humanitarian motives, or the religious and spiritual values resulting to those who pay as well as to those who receive." (4)

A third suggestion is the establishment of a City Children's Bureau.

"We need in Richmond a Child Welfare Bureau as a part of the Department of Public Welfare, staffed by social workers of the same degree of training, experience, and ability as are now found on the staffs of the private agencies. This bureau would administer mother's aid, govern the intake and discharge of all children from the City Home, and to be effective, must have funds for the boarding home care of such dependent children as require such care, and who can not be accepted by the private agencies. The private agencies will continue, of course, to care for as large a number of children as their financial resources will permit.

"The cost of this program would be little more than the per capita cost at present at the City Home and the results of the investment will more than justify this additional expense. What is true of Richmond, is to a considerable degree, true of every city and most counties in the state of Virginia." (5)

At the present time this plan is impossible because the City Council has not made appropriations for this.

A fourth suggestion, similar to the one just mentioned, has been made to the effect that an organization on the same plan as this Child Welfare Bureau be maintained.

5. Ibid.
by the State and in this way lighten the burden already placed on the resources of the city. Such an agency, maintained by the State, would serve children all over Virginia instead of only those children in Richmond or in other cities where such a bureau maintained by the city would function.

The last suggestion is the organization of a local Child Welfare Bureau supported by the city, but under the control and supervision of the State. Such a bureau would tend to centralize the control of children under the State and gain uniformity of practice in regard to dependent children all over Virginia. This plan, like the fourth suggestion, would be a question of widening the State Bureau which at present assumes only cases of delinquent children. Each city under this organization, would be charged for the care of its children. In this way no added expense would be incurred by the State, and the city would bear the burden of the expense yet be under State control. Like all the other suggestions, this plan is impracticable because of financial conditions.

Briefly stated, the chief reasons for the children's being placed in the City Home have been found to be:

1. Mental deficiency
2. Physical condition
3. Family situations affecting children

The group which were in the City Home on account of mental deficiency is composed of thirty-six children all of whom have been carefully tested and retested at the
Children's Memorial Clinic. Again the fact is evident that no other agency can deal properly with these cases in their institutions or under their present organizations, and since there is no money to board them, placement in the City Home until they are old enough to be admitted to the Colony for the Feeble-Minded becomes the only alternative.

There are fifteen children who have major defects or diseases, and respiratory infections. These children present no problem except hospitalization and good nursing care, which would be difficult to obtain outside of an institution or hospital.

Twenty-nine children are in the City Home because of their family situations. Some were born there, in other cases their parents are to be brought up in court for neglecting them and in still other instances the whole family is at the City Home, transients who were stranded here. These situations have been taken up fully in the previous chapter Family Situations of the Children.

These factors have been shown to be very difficult to deal with and with the present facilities which Richmond offers for caring for dependent children the solutions for the problems of the cases of these children are very puzzling. The study has found that with the present resources, in few cases could provision other than placement in the City Home have been made for them.
It has been found by the discussion of the physical condition of the children that they are given good physical care. Regular physical and mental tests are given them. They have the best supervision possible under the conditions. The best recreation possible with the equipment in an institution of this mixed type is provided for the children. However, the play space is not adequate nor the equipment satisfactory for such a large group of children. Also complete segregation of the children from the adult inmates is impossible.

The question of education for the children is one which has caused much discussion among the various agencies which send children to the City Home. There are no public schools near enough to the City Home for the children to attend. The children who are intelligent enough to attend a public school are usually the emergency cases of children who remain in the City Home only a short while. There were only two children of average intelligence eight years of age or over, which is the entrance age limit in the state for compulsory school attendance. The majority of the children, as has been shown in the study, are of dull normal and borderline intelligence and require special classes and special training. As has been shown also in the previous description, the greatest number of these defective children would derive great benefits from some kind of schooling. On the other hand, some agencies contend that if the children are sufficiently intelligent to benefit by schooling they should
not be in the City Home. While the number of children eight years old and over is so small, only twelve or fifteen per cent, of whom only two are normal, it is not a plausible idea to set up a separate school for them. Some teacher who could deal with defective children is needed to give the defective children special training and teach the normal children while they are there.

One factor which presents a difficult problem is the fifty-six per cent of the children who are borderline cases or high grade feeble-minded cases who would adjust better and be improved by boarding home placement.

"These cases of borderline intelligence as they reach adolescence should all be sterilized and in some cases institutionalized." (6).

The children's agencies are willing to board many of these children in private homes under supervision but have no funds with which to board even many of the normal children. Under the present situation many of these children are sent to the City Home because they are not fit for placement in free foster homes and the children's agencies cannot afford to take care of them. They stay there until they are ten years of age, and are then committed to the Colony for Feeble-Minded, but often stay at the City Home for more than a year longer because the Colony is so crowded that it cannot admit these children. Many of these children have good personalities and are almost

normal in appearance. They have had little chance for development.

"Deficiency in brain stuff can not be affected by training and environment but environment can offer useful substitutes." (7)

In most cases, by the time these children are admitted to the Colony much of their childhood has been spent in institutions with little chance for normal development and the best opportunities for training them have passed.

The only thing which is being done at present to improve the situation as it exists at the City Home is the granting of a special fund for the feeble-minded children of the state which project will affect the children in the City Home to a very small extent.

"The State Department of Public Welfare from the technical knowledge of the handling of feeble-minded persons, as well as its experience in this field, has felt the need for some time for having more adequate space for the care and supervision of the feeble-minded in this state.

"The Colony for the Epileptics and Feeble-Minded, at Lynchburg, is always over-crowded and it is not possible to admit the large number of properly committed cases to its care. The care of such cases outside of an institution is necessarily expensive. It is difficult to adjust the feeble-minded child without the use of intelligent specialized home care, and this type of treatment over a long period of time is a staggering financial burden to agencies and to this department.

"Consequently, at the meeting of the General Assembly a fund was granted for the care of some of these cases which are a burden to the case load and financial balancing of the various agencies dealing with this increasing problem. This fund is to be used for that type of child whose intelligent quotient, history of heredity, and aptitude are sufficiently low grade

to warrant his commitment to a training school for the feeble-minded, and at the same time sufficiently high to gratify the belief that with the proper treatment, and frequently the necessary physical corrections and particularly specialized foster home supervision and constant case work can probably make his adjustment in society possible without the training in an authorized training school. Also, under very special conditions, when an agency handling a child, when adjustments to normal environment has been repeatedly unsuccessful and every available source of action on the part of the agency has failed, this child might be boarded after a careful review of the case for a limited time only pending his admission to the Colony for Feeble-Minded.

"These cases are not accepted unless they are first committed to the Colony for the Feeble-Minded. If the case is referred by a private agency, the agency in consultation with the Department of Public Welfare works out a plan for the individual child, taking into consideration the hereditary factors, social background, mental capabilities and liabilities, physical findings, causative factors in the child's present mal-adjustment with a view towards finding a solution for social adjustment and in some cases economic independence of the individual.

"The state is unable at this time to accept detailed supervision of these cases except in rare instances where no social agency exists. The referring agency is required to do this and to send at least quarterly detailed reports on the physical, social and general progress of the children under care. . . .

"One of the children referred by the Children's Home Society, having reached his maximum development in academic training is living in the home of a teacher, receiving individual lessons from her, working on the same farm, learning routine tasks there, associating with desirable companions, taking a part in the community interests suitable to his years, earning his spending money and entirely clothing himself. He feels some sense of achievement and his prognosis is favorable." (8).

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