THE ONSET OF the Great Depression precipitated an unprecedented demand for social welfare and relief services in Michigan and throughout the United States, prompting extensive debates about the most effective means to administer relief. Michigan as a whole suffered extremely high unemployment once the Depression began. State Emergency Relief administrator William Haber recalled that Michigan was extremely hard-hit by the Depression, even in a national context: “When the country has a cold, Michigan has pneumonia.”¹ In 1930 agricultural unemployment was 18 percent. Unemployment at the Ford plants in Detroit reached 32 percent by early 1931. Employment dropped from more than 100,000 workers at the end of 1929 to 84,000 workers in the spring of 1931, and down to 37,000 by the end of that summer. In addition, those who were employed worked only part-time or at reduced wages.² Similar trends occurred in Flint, another major automobile-manufacturing town. In 1928 General Motors employed 208,981 workers; by 1932 that fell nearly 50 percent to 116,152, and the company’s payroll fell 60 percent.³

Between 1930 and 1933 the state overall had an unemployment rate of 34 percent, far higher than the national average of 26 percent. In October 1932, employment rates in Michigan's industries dropped to 41 percent of the rates in the mid-1920s. In 1933 unemployment reached 46 percent, with 485,000 people out of work. At one point, more than half a million people were seeking work in the state. As one historian writes, “Michigan was perilously close to economic disaster.”

By Black Tuesday, many workers were unable to deal with the more serious problems of the Depression. Many laborers, especially those in unskilled or low-wage occupations, had no savings or had already exhausted those funds during the uncertain 1920s. When the Depression reached its worst in 1932, public and private welfare services were strained to the point of bankruptcy. Many fund-raising drives held by private organizations fell short of their goals, and agencies were forced to cut budgets. Private agencies directed more of their funds toward unemployment relief, but could not raise enough money to meet the rising demand; as a result, more and more people turned to public agencies for help.

Public relief for poor, unemployed, or otherwise needy individuals or families was not new, but the administration of that relief changed dramatically in the 1930s. The New Deal programs often signify to many people the beginning of America's welfare state, although 1932 marked the first federal appropriations for public relief. Unlike some states, Michigan had an extensive public welfare system before the 1930s. This system was almost exclusively local, funded with local tax dollars. Much of Michigan's poor-relief system had existed, with only minor changes, for more than a century, and was rooted in township, city, and county governmental institutions. Local elected officials, including township supervisors and probate judges, dictated appropriations for the varied kinds of poor relief, and, if they did not administer such


relief directly, appointed the people who did. Local officials, then, wielded significant power in the distribution of that relief, and would fight to retain that power later in the decade. Public funding and local administration were the central features of Michigan's social welfare system long before the Great Depression and the New Deal.

An 1809 statute established Michigan's poor law and would continue largely unchanged for the next century. It was modeled after English law, with provisions including residency requirements of one year and disbursement of funds by local officials.\(^7\) Many states, following the lead of Pennsylvania, organized relief through the counties. Welfare services included both institutional (usually a poorhouse or poor farm) and outdoor relief. Outdoor relief included all noninstitutional aid, usually cash or in-kind services or goods. Providing relief in most states, including Michigan, was voluntary, although most counties offered some poor relief.\(^8\) Counties could select either the county-wide or the township system. Under the township program, found in Saginaw and Wayne counties, cities and townships within the county administered and financed their own relief programs. Township supervisors or city poor-department superintendents handled the relief responsibilities. Marquette and Van Buren counties used the county system, in which the superintendents of the poor, appointed by the county board of supervisors, administered relief.\(^9\) Virtually all welfare needs—temporary relief needs, medical care, placement in a county or state institution, or even requests for sterilization—originated with a local official.\(^10\)

Eligibility for relief rested on proof of residence for at least one year and evidence of need. Relief recipients in general were to own no property or other means of securing a living. Individuals who had no income or means of support, but who did own property, had to sign their property rights over to the county before receiving aid.\(^11\) This process could be reversed once the indi-

\(^7\) Opal V. Matson, *Local Relief to Dependents* (Detroit: Detroit Bureau of Governmental Research, 1933), 9.


\(^9\) Matson, *Local Relief to Dependents*, 12; *Annual Abstract of the Reports of Superintendents of the Poor in the State of Michigan* (Lansing), 1891, 1895, and 1900. According to these reports, forty-seven of Michigan's eighty-three counties used the county system of organization for poor relief, while twenty-five counties used the township system.


individual became self-supporting. The goal was to permit the county to recover its relief costs from an estate if a recipient died while receiving public aid.\textsuperscript{12} In some cases, poor individuals who owned property deeded ownership to the county in exchange for regular support payments. The superintendent of the poor agreed to provide weekly relief payments and fuel, and the recipient retained a life lease on their home. Upon death, the county received the property. Mrs. Maria Lercat of Paw Paw (Van Buren County), for instance, sought county care for her property in June of 1912; she received $1.50 per week plus fuel and deeded her house and lot to the county.\textsuperscript{13} Such cases generally involved property owners who had no family who could care for them or to whom they could leave their property in exchange for care. Mrs. Lachapelle of Marquette, on the other hand, a widow who owned property that generated some rental income, refused to sign a deed transfer and therefore did not receive aid.\textsuperscript{14} Individuals who refused to deed property to the county generally were ineligible for poor relief, a practice that continued under the state’s old-age pension law.

The responsibility of families to support their members was a cornerstone of poor relief administration. Laws mandated this implementation. Family members, including parents, grandparents, spouses, and children, were expected to contribute to, if not fully support, family members in need. The responsible-relative clause is found in the earliest poor laws and remained in force under Public Act 146 of 1925, which consolidated Michigan’s poor laws. Township supervisors or superintendents of the poor enforced such support through the probate court, which could order family members to provide financial support.\textsuperscript{15} Officials often refused relief to individuals if they believed relatives were able to support them, or reduced the poor-relief grants to applicants if family members could contribute. Anne Kokka was receiving

\textsuperscript{12} This was used most often for individuals committed to an institution for relief, such as the poor farm, poorhouse, or county infirmary. Such aid was considered “permanent support,” while outdoor relief was seen as temporary.

\textsuperscript{13} Minutes of the Superintendent of the Poor and Poor Commission, Van Buren County, Western Michigan University Archives, entries for June 6, 1912, and October 1, 1936.

\textsuperscript{14} “Proceedings of the Board of Superintendents of the Poor,” Marquette County, December 17, 1926, Marquette County Historical Society.

medical care from Marquette County, but an investigation found that she had several adult children, with one daughter living with her, and owned her home. The superintendents of the poor agreed that her children could provide her medical care and support her.\textsuperscript{16} Mrs. Elliot was also cut off from aid when superintendents learned she had a daughter willing to take her in. Subsequent investigation discovered that the daughter had moved and did not save room for her mother, and aid was resumed.\textsuperscript{17} Most poor-relief officials looked to families first for support, a practice that would continue in the New Deal programs and the reorganized welfare programs that followed.

Records documenting poor-relief practices often include only lists of bills paid and weekly or monthly totals of relief disbursed. In some cases, the administrator listed individual names and dates, as well as items or services granted. Although limited, these records do yield some insights. Outdoor relief, for example, could be in the form of grocery orders (redeemable for certain items at specific stores), fuel (wood or coal), clothing, and medical care (doctor’s visits, medicine, or medical supplies). Car repairs and items such as stoves might also be provided if deemed necessary. Cash relief was a rarity not only in Michigan welfare but throughout the country before the New Deal years.

Michigan’s medical system was a mix of state and local services, with significant variation throughout the state. Counties provided and investigated medical needs in different ways, and the system relied in part on the ability and willingness of the medical profession to provide services to the poor. Nathan Sinai, a public health expert who authored a 1933 report on the status of the state’s medical relief, argued that it was “an outstanding example of social ‘blindspot,’” one that developed “so widely and so largely and yet so haphazardly.”\textsuperscript{18} Sinai was extraordinarily critical of the system: “Under the system of relief in effect prior to the inauguration of the Emergency Relief Administration, medical relief appeared to be everybody’s business in general but nobody’s job in particular.”\textsuperscript{19}

Medical relief was coordinated at the local level, and its organization centered on whether the county operated relief under the county or township system, as with poor relief. Hospitalization was provided through the Univer-

\begin{itemize}
\item \textsuperscript{16} “Proceedings of the Board of Superintendents of the Poor,” Marquette County, January 18, 1924, Marquette County Historical Society.
\item \textsuperscript{17} “Proceedings of the Board of Superintendents of the Poor,” Marquette County, October 19, 1927, January 17, 1929.
\item \textsuperscript{18} Nathan Sinai, Marguerite F. Hallo, V. M. Hogue, and Miriam Steep, \textit{Medical Relief in Michigan: A Study of the Experience in Ten Counties} (Ann Arbor, MI: Edward Brothers, Inc, 1938), 2.
\item \textsuperscript{19} Sinai et al., 12.
\end{itemize}
A Local Problem

University of Michigan Hospital, created in 1875 to serve the needs of the poor in the state and to offer teaching opportunities for medical students. Once approved by the probate court, patients were cared for at the hospital, with the local unit paying the hospital costs but the state covering professional services. In 1933 the law allowed care at a local approved hospital, but local units paid all costs. Children were eligible for hospital care beginning in 1875, and adults were eligible under a 1915 law. Children's hospitalization was covered by state funds.20

Physician care was part of the state's outdoor-relief system and thus was both administered and financed entirely by local funds. Counties used a variety of systems to provide medical care to the poor, but virtually all reports examining the system concurred with Sinai's assessment: the medical-relief system was one of overlapping and duplicating agencies with little coordination, which resulted in higher costs and lower patient care. Some contracted with medical societies, and two counties (Wayne and Kent) operated medical clinics for the poor. Some counties employed a physician for a monthly salary, while others paid their county physicians on a fee basis. Critics argued that contracts for physician care often went to the "lowest bidder," with little attention to the quality of care.21 Van Buren County's poor officials, for instance, received several bids from doctors in 1912 for medical care, but opted for the lowest bid. When that physician died a year later, they again chose the lowest bid among the submissions.22 Investigation and approval for such care was the responsibility of local officials, either superintendents of the poor, township supervisors, or county agents, depending on the administrative setup in the county.

Temporary, or outdoor, relief was the dominant form of poor relief offered both in Michigan's counties and in the country as a whole. Residents sought aid from either a township supervisor or a superintendent of the poor, who decided what relief to provide. Historian Michael Katz argues that outdoor relief served far more people than did institutions in the United States, a trend true in Michigan's eighty-three counties.23 People were much more likely to receive a grocery or fuel order, or perhaps assistance with medical treatment or rent, than they were to seek care in an infirmary. Infirmary residents

21. Sinai et al., 18; Bruce and Eickhoff, 82–83.
22. Minutes, Superintendents of the Poor, Van Buren County, entries for February 12, 1912, and April 2, 1913.
accounted for a small portion of the care provided through local public channels—usually less than 5 or 10 percent for all counties. Statewide figures show that infirmaries served anywhere from 6 percent of all cases receiving aid (in 1895) to a high of 16.5 percent in 1920, while the remainder received noninstitutional relief.  

Wayne County passed Michigan's first law enabling the construction of a county infirmary in 1828. The territory followed suit the following year, passing legislation that allowed counties, townships, and cities to raise tax funds to construct such institutions to be run by appointed boards. Many of these institutions developed in states across the country in the antebellum period, a part of the shift to institutional care for many groups classed as “dependents” in society. Michigan had eighty-one infirmaries by 1933. Superintendents of the poor or township supervisors authorized institutional care. A 1933 report on Michigan's welfare system noted that few formal requirements for the administrative positions existed, and “in a few instances the position is given to the lowest bidder.” This study also found that more than half of all infirmary keepers were farmers. Such institutions usually were administered by a husband and wife, where the husband served as keeper, responsible for operating the farm, and the wife as matron, responsible for the management of the infirmary. Residents receiving outdoor relief also might be required to work at the infirmary for their aid. 

Michigan’s infirmaries housed anywhere from five thousand individuals in 1891 to thirty thousand in 1938—five years after the New Deal programs began. Residents of infirmaries represented only a fraction of those receiving relief of some form, but the infirmaries remained an important part of the relief structure. Men tended to outnumber women residents, accounting for about three-quarters of reported residents from 1891 to 1938. Children

24. See Abstract of the Reports of the Superintendents of the Poor, table II. The figures used in this section on Michigan infirmaries come from a sampling of annual reports of the superintendents of the poor. I examined figures in every fifth year available, beginning with 1891 (the 1890 report was not available) and ending with 1938, the last published report. See Abstract of the Reports of the Superintendents of the Poor, table I, 1891, 1895, 1900, 1905, 1910, 1915, 1920, 1925, 1930, 1935, 1938.


27. Matson, Local Relief to Dependents, 25.


29. St. Clair Superintendent of the Poor Records, Box 1, Folder 2, State of Michigan Archives, Lansing.
also continued to reside in infirmaries, although institutions had attempted to cease admitting children by the 1870s and 1880s, since such care was deemed damaging to children. Michigan sought to remove children from its infirmaries in 1871 with the founding of a state school for dependent children. (Small children could remain with their mothers if in a county institution.) Never a large portion of the state totals, children did comprise anywhere from 1 to 8 percent of the total poorhouse population.30

County infirmaries, formerly known as poorhouses, were also key institutions in the care of the aged and infirm. Originally conceived as institutions to provide for the poor, infirmaries had evolved by the twentieth century into informal nursing homes for the elderly poor, and by the 1930s had a “great proportion of mentally and physically infirm,” with only a very small number of residents considered employable.31 Medical care was the “weakest spot in the whole program of infirmary care.” Just one infirmary had routine medical examinations, and just twenty scheduled regular visits by doctors. In 1933, two infirmaries even housed tubercular patients with other residents.32 Three years later, still only seven infirmaries had hospital accommodations, and some counties transferred terminal patients to the infirmaries to die.33

People of color were underrepresented in infirmary populations, seldom accounting for 2 percent of the total in the years reported.34 In Wayne County, which had the largest concentration of African-American residents in Michigan, blacks rarely were more than 4 or 5 percent of the infirmary population.35 In part this reflects the low numbers of African-Americans in the total state population. People of color were 4.4 percent of the state’s population in 1930, 2 percent in 1920, and less than 1 percent in 1910. But such figures were much higher for specific counties. Wayne County’s black population, for instance, had increased from 1.1 percent in 1910, to 3.7 percent in 1920, to 7 percent in 1930; other counties with significant black populations were Cass, Lake,

32. Matson, Local Relief to Dependents, 30.
34. Reports provide a breakdown by race (including figures for African-Americans, mulattoes, and Indians) until the turn of the century. After that year, reports included nonwhites in the “foreign-born” figure.
35. See Annual Reports for County of Wayne, 1895, 1900, 1905, 1910, 1915; also Abstract of the Reports of the Superintendents of the Poor, State of Michigan, years aforementioned in previous footnote.
and Saginaw.\textsuperscript{36} The issue of race received little attention in surviving records, including the published reports of both the state and Wayne County. The small number of nonwhite residents in county infirmaries was likely a combination of racism and exclusion.

Infirmaries were important sources of aid for Michigan’s foreign-born residents, although statistics on citizenship status were not reported. Infirmaries in nineteenth-century America tended to have high numbers of foreign-born populations in relation to reported census figures.\textsuperscript{37} State figures show that native-born white Americans accounted for about half of county institutional residents through 1925. After that year, native-born whites accounted for slightly more than half: 54 percent in 1925, 62 percent in 1930, 53 percent in 1935, and 56 percent in 1938. The slight decline in numbers of foreign-born residents likely reflects the more restrictive immigration laws in effect, but throughout the period foreign-born whites nevertheless resided in institutions in far greater numbers than their share of the state populations.\textsuperscript{38} Nineteenth-century critics argued that the presence of the foreign-born in infirmaries dominated because of the negative character traits attributed to many immigrants, such as laziness or ignorance, rather than circumstances or factors outside the infirmary residents’ control.\textsuperscript{39}

**JUDICIAL AUTHORITY, LOCALISM, AND THE CASE OF MOTHERS’ PENSIONS**

Implementation of mothers’ pensions in 1913 represented Michigan’s first new welfare program in decades, and continued the trend that programs be funded and administered locally. Enacted at the state level and administered by local officials, mothers’ pensions sought to provide poor mothers with a means to raise their children in their home and were a part of the philosophical shift from institutional child care to home care for dependent children. The term

\textsuperscript{36} See fifteenth census of the United States, 1930, table 2, 1115; table 13, 1135–40; thirteenth census of the United States taken in the year 1910, vol. ii, population, 946; fourteenth census of the United States taken in the year 1920, vol. iii, population, 487.

\textsuperscript{37} Katz, in the shadow of the poorhouse, 92–94.

\textsuperscript{38} Abstract of the reports of the superintendents of the poor, years aforementioned. fifteenth census of the United States: 1930, vol. i, population (Washington, D.C.: U.S. Government Printing Office, 1931), table 2, 1115. As noted, the poor reports do not specify citizenship status, so it is not known how many of those classified as foreign-born were naturalized citizens. According to census figures in 1920 and 1930, 28.6 percent and 34.2 percent (respectively) of the foreign-born had not pursued citizenship at some stage.

\textsuperscript{39} Rothman, The Discovery of the Asylum, 290–91.
“pension” was critical; mothers were to be paid for the work of raising children. It was not to be relief or welfare, but an earned benefit much like a veteran’s pension. Like many such laws, Michigan’s 1913 mothers’ pension law did not allocate state funding, and counties had to provide money for the program from their own budgets. Michigan’s law placed the program within the juvenile court, and thus probate judges, along with county agents, were its chief administrators. Disputes over whether mothers’ pensions were, in fact, pensions or were instead poor relief, ambiguities in the law, as well as what David Rothman has called the “cult of judicial personality,” resulted in significant variations in the program’s administration across Michigan and in many other states.

Juvenile court programs and mothers’ pensions both grew from the Progressive Era’s efforts to marshal the power and authority of the state to address social problems. Mothers’ pensions emerged as part of domestic relations law, directed by what Michael Grossberg calls a “judicial patriarchy.” Judges “began the buffer and the referee between the family and the state,” with considerable power over the family: “Family law became their patriarchal domain.” Grossberg argues that, by the end of the nineteenth century, judicial patriarchy defined the role of judges in family law. In the early twentieth century, this judicial authority extended into the realm of welfare and poverty with two goals: to provide appropriate care for dependent children but also to limit financial dependency on the state. Many states, including Michigan, criminalized desertion and nonsupport by fathers in an effort to force fathers to provide for their children. Without support, children could be placed either in boarding homes or institutions, or their mothers could seek a pension. Administration of welfare and juvenile justice intersected in what Michael


43. Anna Igra argues that a “dual system of family law” developed in this period, particularly in relation to antidesertion efforts. The category of deserted wives became separate from widows in the early 1900s, and deserted wives were directed to the legal system, rather than the welfare system, for support. See *Wives Without Husbands*, 43.
Willrich terms a “mode of governance whose object is not merely to provide a modicum of economic security to citizens but to keep legitimate claims upon the public purse to a minimum.” Public support was to be the last resort for financial support for children, as was the case in poor relief. The ambiguous position of mothers’ pensions illustrates the tension created by competing goals: providing adequately for dependent children, recognizing the work of motherhood, and minimizing the state’s welfare burden.

The first mothers’ pension laws at the state level emerged in the second decade of the twentieth century, and by 1926 forty-two states had mothers’ pension programs. Nearly half of those states, including Michigan, placed administration of the program in the juvenile court. Some states simply placed the program under existing welfare administrators, such as superintendents of the poor, while other states created a new local agency that often was responsible for all forms of poor relief, including mothers’ pensions. Administrative designations fell somewhat along regional lines; Midwestern and Western states tended to use juvenile courts more than states in the Northeast. Most Michigan counties administered the program through the juvenile court staff, usually comprised of the judge, county agent, and perhaps a probation officer. Larger urban counties, such as Wayne and Kent, created separate departments and staffs for the mothers’ pension program. The placement of the program in the juvenile court continued to be debated, because some judges and other officials believed it belonged in the poor-relief program. But the programs were funded and administered locally in all states; the only variation was which local officials were the administrators.

The choice of the juvenile court reflected the link some experts saw between the presence of mothers in the home and the rate of juvenile delinquency: allowing mothers to remain in their home to raise their children would reduce


47. The issue appears periodically in the proceedings of the National Probation Association, but it is also telling how rarely mothers’ pensions are discussed at the national meetings. For an example of the argument that the court was not the appropriate site for the program, see James Hoge Ricks, “The Place of the Juvenile Court in the Care of Dependent Children,” *Social Service and the Courts, the Annual Report and Proceedings of the Fourteenth Annual Conference of the National Probation Association* (Albany, NY: National Probation Association, 1920): 124–29; Matson, *Local Relief to Dependents*, 37–39.
the chances that the children would become delinquent. Mothers’ pensions were a means to prevent juvenile delinquency in families where the only problem was poverty due to the absence of a male breadwinner. Wayne County’s Judge D. J. Healy, in fact, called the program “preventive” and argued that children under the supervision of the mothers’ pension program became delinquent at a much smaller rate than children outside the program. Those who, like Judge Healy, supported placement of the program in the juvenile court argued that pensions were distinct from relief and did not belong in a welfare agency. Some recipients preferred administration by the juvenile court not so much because of support for the probate judges, but rather for its separation from other welfare programs. To them and to part of the public, mothers’ pensions were not stigmatized in the way that other welfare programs were. Consequently, benefits were sometimes more generous.

Michigan’s 1913 mothers’ pension law provided material support for needy children whose mother was a “suitable guardian” and for whom the only problem was financial need. Like many other state mothers’ pension laws, Michigan’s program relied solely on local tax dollars budgeted through county boards of supervisors. Probate judges, elected to four-year terms, administered the program and had an extraordinary amount of discretion, including who would receive pensions and for how much. They hired the staff—either investigators of the mothers’ pensions, or county agents—who dealt with the scrutiny of pension applications, and had final say in whether a pension was awarded. Their discretion was linked to Progressive Era beliefs that individual treatment was the best way to address issues related to crime, including juvenile delinquency. As a result, juvenile courts had very few guidelines, a situation that produced a “cult of judicial personality,” or “a system that made the personality of the judge, his likes and dislikes, attitudes and prejudices, consistencies and caprices, the decisive element in shaping the character of his courtroom.” Probate courts varied considerably in their operation, including the administration of mothers’ pensions, regardless of the state law.

Guidelines by the National Probation Association and the U.S. Children’s Bureau recommended that a probate judge have “special qualifications for juvenile court work. He should have legal training, acquaintance with social

48. Lundberg, Public Aid to Mothers with Dependent Children, 10; Goodwin, Gender and the Politics of Welfare Reform, 101–4.
51. Rothman, Conscience and Convenience, 238.
problems, and understanding of child psychology." But this was not always the case, according to NPA field secretary Francis Hiller, and Michigan vividly illustrates the gulf between theory and practice. They were elected officials generally identified with one of the major political parties. The position had no eligibility requirements, aside from U.S. citizenship, county residence, and a successful bid for election. Neither legal training nor education was necessary, and many judges in fact were not attorneys. A 1933 study of six Michigan counties found that just three judges had legal training, while three others were a civil engineer and farmer, a general store owner with an eighth-grade education, and a former lumber-company foreman. A 1936 Michigan study of seventeen counties reported that some judges serving on the bench had less than an eighth-grade education. Just four judges were attorneys, and most did not have training either in law or in social work. Sitting probate judges were formerly farmers, barbers, county sheriffs, real estate salesmen, and court employees. They were an all-male, older population, with half beyond the age of fifty. Few met the guidelines advocated by the NPA and the Children's Bureau.

Michigan's case also illustrates the significant variation in administrative practices, a trend rooted in the program's local administration and funding. The lack of uniformity is explained largely by the varied beliefs and practices of the probate judges. Michigan's law was among the most liberal and inclusive in the country. On its face, all mothers—unmarried, deserted, widowed and divorced, white and nonwhite, citizen and noncitizen—were eligible for pensions. Michigan was also one of just three states to provide aid to unmarried mothers. But a 1934 study by the State Department of Welfare found that...
twenty-one counties refused aid to certain categories of mothers, despite the broad scope of the law. Seventeen counties refused pensions to divorced or unmarried mothers and four counties excluded aid to children whose fathers were in prison.\(^{58}\) Widows were the overwhelming majority of recipients throughout the life of the program, often accounting for as many as three-quarters of the petitions granted.\(^{59}\) Many counties would not support mothers with only one child, and some also excluded cases involving desertion, alcohol, insanity, and the physically handicapped.\(^{60}\) The state attorney general also reinforced the discretion accorded to probate judges in 1938, arguing that the word *may* in the law was key; the judge had the power to grant aid, but was not required to, and any grant continued only “until the further order of the court.”\(^{61}\)

Although the evidence of overt discrimination is somewhat limited, the racial demographics of mothers’ pension recipients further point to judicial discretion in the program’s administration. Historians have documented the discriminatory nature of the program in many states, linking such discrimination to local administrative control. A 1931 U.S. Children’s Bureau report found that just 3 percent of all pension recipients were black, and many of those were concentrated in just two states.\(^{62}\) As Joanne Goodwin has shown, the numbers of black recipients in Chicago were not proportionate to the size of the black population, despite the city’s high number of female-headed households from 1910 to 1919.\(^{63}\) By contrast, the proportions of blacks in the mothers’ pension program were higher in some regions of the country than the number of blacks in the population.\(^{64}\) Mothers’ pension programs did

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58. Reba F. Harris, *Mothers’ Pensions in Michigan: Report of a Study Made by the State Welfare Department* (Lansing: State Welfare Department, 1934), 1, 3–5; Memorandum of State Welfare Department, “Report on Mothers’ Pensions for the Fiscal Year,” 1935, WRSC Records, Research and Information Files, Box 14, Folder 5, Archives of Michigan; “Sampling Survey,” Box 6, Folder 5 (Hillsdale County), and Box 7, Folder 5 (Oakland County), WRSC Records.


60. Harris, *Mothers’ Pensions in Michigan,* 6. Widows accounted for 61 percent of the cases analyzed in the report, with unmarried mothers accounting for just 1.25 percent. Divorced mothers were 8.8 percent of the total, and deserted mothers 16 percent.


provide aid to immigrants and generally perceived them as able to integrate fully as Americans.  

Nonwhite mothers did have access to mothers’ pensions in some areas of Michigan, but their numbers were relatively small. State reports in Michigan recorded only the marital status of the recipient, and later also recorded nativity, and the 1934 study included no information on the operation of race in the program. A state investigation of Saginaw County’s poor-relief system in 1933 revealed that mothers’ pensions were extended to a somewhat diverse group of dependent mothers. This group included the foreign-born, women of color (both African-American and Mexican), and nonwidows. Five percent of Saginaw County’s mothers’ pension recipients in 1932 were either African-American or Mexican. Yet it is difficult to determine how many other applicants were turned away or discouraged from applying in the first place. Given the larger obstacles to financial stability for nonwhites (e.g., employment and housing discrimination), these numbers likely underrepresent the actual need for aid among these mothers of color. Who was granted aid remained an issue of local discretion.

Despite efforts to separate the program from welfare, administrative practices often blurred the distinction. The 1934 study by the State Department of Welfare argued that although the pensions were not intended to be poor relief, courts and probate judges used them in that way. Opal Matson, for instance, clearly placed mothers’ pensions in the welfare system in her 1933

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67. Seventy percent of recipients of mothers’ pensions, according to the 1933 report, were native born. Some mothers’ spouses were in institutions, and one was unmarried. *Proceedings, Saginaw County Board of Supervisors*, January 11, 1933, 54–55. Similar figures appeared in the 1936 study of Kalamazoo County’s program. Sixty-five percent of recipients were widows, and 20 percent were divorced or deserted. Just 3 percent were unmarried, and 12 percent had spouses in institutions (prison, insane asylum, or tuberculosis hospital). Probate Court, Kalamazoo County, Welfare and Relief Study Commission Records, Box 7, Folder 2, Kalamazoo County.

68. State reports (Michigan Board of Corrections and Charities 1913–1920; Michigan State Welfare Commission 1921–28) indicate that many applicants were never granted aid, but the reports do not provide any information about whose applications were denied. See also Ofman, “A Rural View of Mothers’ Pensions,” 102.
assessment of relief programs in Michigan. More than one attorney general, however, ruled that the mothers’ pension program was not poor relief, and was separate and independent of poor-relief legislation for a reason: “Had the legislature intended this to be poor relief, it is reasonable to assume that it would have given supervision of such allowances to the superintendents of the poor and the township supervisors who have the charge of poor relief.” But not all agreed with that assessment. Seven Michigan counties had no mothers’ pension programs even by 1917, not because of a lack of funds, but “due to a deliberate conviction on the part of the [probate] judge that the county poor officials are better fitted to handle relief work than the court.” Marquette County’s probate judge and poor officials worked together to determine the most cost-effective means to provide aid. The judge referred some cases to the poor commission, believing that it could provide support more cheaply than the mothers’ pension program. In one case, the judge requested poor relief instead of a mothers’ pension because he didn’t think a cash allowance would “be properly and judiciously spent.” No specifics were listed, but the judge told the board that “home conditions were such that if a Mothers Pension were granted, the children would not receive the full benefit of that aid.” Many counties refused to provide both mothers’ aid and poor relief, regardless of the adequacy of her mothers’ pension grant.

The perception of mothers’ pensions as poor relief depended in part on the investigative methods of the probate judge. Investigation procedures varied, and were directly linked to whether judges saw the pensions as poor relief or a “pension.” Sixty-two counties used the county agent to investigate such cases, as stipulated by law. Six counties used either the probation officer or an investigator of mothers’ pensions. But the report harshly criticized the seven

69. Matson, Local Relief to Dependents, 36–39.
72. “Proceedings of the Board of Superintendents of the Poor, Marquette County,” Marquette County Historical Society, January 18, 1924, and March 21, 1924, 37, 44.
73. “Proceedings, Superintendents of the Poor, Marquette County,” January 22, 1931, 187. The mother received a rental allowance of ten dollars per month, and a monthly grocery order for twenty dollars.
74. Mrs. Mary Blaud of Van Buren County asked the poor commission to cease payments to her, as the probate judge refused her a mothers’ pension as long as she received poor relief. Why she preferred a mothers’ pension is not clear, but the reason was likely either that the funds were greater or more secure, or that she saw the mothers’ pension as carrying less stigma than general poor relief. Minutes of the Van Buren County Superintendent of the Poor, April 1, 1914.
counties who used superintendents of the poor, township supervisors, or even jail officials as investigating officers. It also criticized the influence of such officials on the investigations, even if they were not conducting them.\textsuperscript{75} To many probate judges, a mother’s pension was poor relief, and thus they administered the law as such.

Judicial discretion, in conjunction with budget limitations, also affected the size of mothers’ pension grants, which seldom reached the legal maximum level. Although by 1921 the law allowed up to $10 per week—and not less than $2 for one child—benefits averaged far below that, and also varied depending on what category the mother's situation fit. Counties paid a low of $0.40 per child per week in extreme cases to anywhere from $1.22 to $2.33. The state average was $1.75. Some probate judges would provide funds for only three or four children, regardless of the size of the family.\textsuperscript{76} By the 1930s benefits in some counties barely covered the family’s food, not to mention rent, clothing, and medical care. Variations in grant amounts point to the extremely limited funding of mothers’ pensions, reinforcing Joanne Goodwin’s argument that such aid was merely partial support.\textsuperscript{77} Inadequate grants were a national problem with mothers’ pensions, and Michigan actually ranked sixth in a 1931 study of average grants. But variations within the state, again because of judicial discretion and local control, rendered the averages less meaningful.\textsuperscript{78}

Inadequate grants prompted many recipients (up to 44 percent) to seek paid work, or to have older children work. The numbers are likely low, as many mothers hid their employment in fear of losing their benefits.\textsuperscript{79} In part, inadequacy was a function of finances, particularly during the Depression, as counties eliminated pensions or reduced grants. But variations in grants, and the inadequacy of mothers’ pensions, predated the Depression, according to a 1926 study. The study pointed directly to the discretion of judges and poor investigative methods as the reasons for the varied amounts of grants: “The differences seem to be mainly due to different attitudes on the part of the

\textsuperscript{75} In many counties, the report stated, such individuals dictated the policies and administration of the mothers’ pension programs, and in eight counties the local officials actually placed the mothers’ pension checks in their own accounts. This point is emphasized in the 1934 study as well as the 1936 Welfare Relief and Study Commission report on Michigan’s welfare system. Both criticized the program’s administrative practices.

\textsuperscript{76} Harris, Mothers’ Pensions in Michigan, 8–9; Public Act No. 16, Michigan Public Acts, 1921, 787.

\textsuperscript{77} Harris, 8–9; Ciani, “Choosing to Care,” 99–102; Ciani, “Hidden Laborers,” 45–46; and Goodwin, The Politics of Welfare Reform, 169–75.


\textsuperscript{79} Harris, Mothers’ Pensions in Michigan, 13–14. For a study of Allegan County, Michigan, and this issue, see Ofman, “A Rural View of Mothers’ Pensions,” 110–11.
judges, some being more in sympathy with the system than the others.” The variation in grants reveals the gulf between the ideal of supporting a mother’s full-time care of her children, and the views of many probate judges.

Some probate judges did not believe that mothers’ pensions should be full support and administered the program deliberately using the concept of “partial support.” Manistee County Probate Judge Fred Stone told the annual gathering of superintendents of the poor in 1924 that the pension was to supplement the mother’s income (or income from older children). He rejected the notion that women’s role was simply the home caretaker, and argued that most women had to help the family with wage work at some point. “It is very seldom that the probate court is called upon to aid those where the wife didn’t help out during the husband’s life time, and I don’t believe that she should expect or the people should expect that she should be supported entirely by the county and do nothing for herself to earn money.” Stone argued that the pension was to be the supplementary income in the family—not the sole source of support. The mothers’ pension was not to bring these families into the middle-class ideal of a mother whose sole focus was care of the home and family, as advocates of the pension concept argued. The Manistee County Board of Supervisors agreed with this philosophy in 1933 when it protested the minimum provision of $2 per week because it was “inadvisable, unnecessary and tends toward undue allowance under present conditions.” The supervisors believed the amount of the grant should be the discretion of the probate judge. Kent County Judge Clark Higbee expressed similar ideas in 1914, noting that one mother receiving a mothers’ pension had “fine children; no better in Michigan.” They needed “her care and attention; they require that she stay in her home and care for them.” But he also noted that “she is helping too,” financially.


81. Proceedings of the Twenty-First Annual Convention of the State Association of the Superintendents of the Poor, Keepers and Matrons of the County Infirmaries, and City Poor Directors, August 28, 1924, 55–56. See also “Local Public Welfare,” WRSC, 96–97.

82. “Supervisors’ Proceedings, Manistee County,” vol. 13, April 12, 1933, 98–99. The resolution opposing the minimum allowance passed unanimously. Wayne County also supported the resolution. Official Proceedings of the Board of Supervisors of Wayne County, 1933, September 18, 1933, 239.

83. Proceedings of the Eleventh Annual Convention of State Superintendents of the Poor and Keepers of County Infirmaries, Thursday, September 24, 1914, Grand Rapids, 90.
Chapter One

THE 1920S: EARLY SIGNS OF STRESS

It is true that the Great Depression placed an immense strain on Michigan's poor-relief system, but the state's economic problems originated in the 1920s and went far beyond unemployed auto workers. As in many other parts of the country, the relief needs in Michigan also increased in the decade prior to the Great Depression. Michigan residents worked in agriculture, extractive industries such as lumber and mining, and, by the 1920s and 1930s, the growing industrial centers of Flint and Detroit. Agriculture was a statewide occupation, although the best land was found in the southern and middle parts of Michigan (including Van Buren County) and in what is known as the thumb area, around Saginaw Bay and the Lake Huron shoreline. Parts of the northern Lower Peninsula also yielded significant fruit production. Mining was an Upper Peninsula industry, particularly in the Lake Superior regions (including Marquette County), and the lumber industry was centered in the northern Lower Peninsula and the Upper Peninsula. Counties that relied on a single industry, such as Wayne, which includes Detroit, suffered immeasurably more than counties and cities, like Saginaw, that had more diverse economies.

Michigan agriculture produced a variety of crops, including fruit, grains, beans, and sugar beets, in the late nineteenth and early twentieth centuries. Michigan's total acreage in agriculture—about half of the available land in the state—peaked at more than 19 million acres in 1920. The value of the state's farmland reached a high of seventy-five dollars per acre in 1920, but fell to forty-five dollars by 1930. The value of Michigan's agricultural products reached a record high in 1920, but would not again attain that level until 1969. Farming areas could weather hard times with subsistence agriculture in a way that urban workers could not, but the 1920s still proved difficult for many farmers and agricultural workers.

Mining, a Michigan industry that was in its heyday in the nineteenth century, remained a significant source of employment into the twentieth century. Michigan produced half of the world's copper in the mid-nineteenth century.

85. Kalamazoo was a major producer of celery, and the Lake Michigan shore, stretching from southwestern Michigan north to Grand Traverse Bay, was the state's major fruit belt, producing peaches, apples, and berries. The state ranked second in the nation in sugar beet production. Michigan, 59–60.
87. Michigan, 63.
and remained in third place as late as 1913. World War I prompted a new boom in copper and iron-ore mining. Iron-ore production reached its peak in 1920, but fell to less than 25 percent of that level the following year. Increased mechanization also reduced the need for labor, sending many workers to the unemployment line. Employing 19,000 workers in 1909, copper mining in the Upper Peninsula employed only 12,200 workers ten years later and was down to 7,800 by 1929. Between 1921 and 1925, 25,000 people left the copper-mining regions of the Upper Peninsula for opportunities in the auto industry in Detroit and Flint.

Lumbering experienced a history similar to that of mining. Lumbering was at its peak in the nineteenth century, particularly in the cities of Saginaw and Muskegon, though lumber mills and camps were found throughout the northern parts of Michigan. Michigan led the nation in lumber production and employed more than 45,000 workers in 1889. By the turn of the century lumber was on the decline, but the state still had 437 sawmills in 1905. Two decades later, however, the industry was in a serious downturn, with only 12,000 workers in 1925. Workers often combined part-time lumber employment with farming or other seasonal work as the industry scaled back in the early part of the twentieth century into the 1920s.

Michigan's increasing reliance on industrial production worsened the effects of the economic depression. Its industrial production increased markedly in the early twentieth century, in large part because of the development of the automotive industry, as well as foundries and machine shops. Other significant industries included paper manufacturing and cereal production in the southwestern region and furniture manufacturing in the Grand Rapids area. Cities hit especially hard in the 1920s included Detroit and others dependent on the automotive industry. The 1920s was a period of ups and downs for the auto industry, with layoffs occurring several times during that period. Employment fluctuations, and layoffs for retooling, contributed to what was a
very unstable period for many workers, who turned to local welfare agencies, both public and private, for aid when their own resources were exhausted. Racism usually resulted in quicker layoffs for both African-American and Mexican workers, but all workers, particularly the unskilled, faced uncertain times in the years before the Great Depression. By the end of 1920 about 80 percent of Detroit’s auto workers were unemployed. Another production slowdown occurred just a few years later, resulting in a recession and more layoffs in 1926–1927. For workers with little experience in urban living, unemployment with no land resources on which to draw was daunting. These problems placed heavy burdens on local relief agencies. Communities such as Saginaw, which manufactured auto parts for the Detroit plants, also experienced downturns, but a more diversified industrial base lessened the magnitude of the Depression’s unemployment.

PUBLIC VS. PRIVATE RELIEF

Both public and private welfare services existed in most Michigan communities by the 1920s, but the two represented different approaches to social welfare. For the trained social worker, private welfare was the only likely place for employment. Few public programs were large enough to warrant full-time staff, and few areas saw a need for a professional social worker. Very few public agencies were members of the major social work organizations, including the Family Welfare Association, and most membership requirements precluded the admission of public agencies. Private agencies focused on family casework, with relief as a supplemental service. They sought to help families or


95. Vargas, Proletarians of the North, 80–82; Richard W. Thomas, Life for Us Is What We Make It: Building Black Community in Detroit, 1915–1945 (Bloomington: University of Indiana Press, 1992), 45–47.

96. Josephine Chapin Brown, Public Relief, 1929–1939 (New York: Henry Holt, 1940), 54. The Family Service Association was a national umbrella organization for its member organizations. (It was originally chartered in 1911 as the National Association of Societies for Organizing Charity; the name was changed to the FSA in the 1930s and then the Family Welfare Association in the 1940s.) It provided a voice for social welfare professionals in the social welfare field and was largely composed of private agencies. Some public agencies did seek membership. This agency served private organizations in nine Michigan cities, including Marquette. Social Service Organizations, ed. Peter Romanofsky (Westport, CT: Greenwood Press, 1978), 302–6.

individuals solve the problems that caused their “need” for aid, which they understood to stem from other issues, including family conflict, ill health, or other situations that had caused their economic difficulties. Rather than simply providing material relief, private social workers sought to help families become self-supporting. Even in Detroit, the state’s largest city, no private agency provided relief to needy individuals, who had to turn to the public agencies.98 In contrast, public welfare was a temporary measure focusing only on the immediate material needs of the recipient. A common criticism of public welfare by the early twentieth century was the lack of record keeping and casework conducted by public officials.99

Private welfare encompassed a range of agencies that served a variety of constituencies. Some centered on specific religious, racial, or ethnic groups, while others were more broadly based. The development of private welfare was largely an urban phenomenon, and rural areas had far fewer private charity organizations, further highlighting the importance of public relief in the state. Each private welfare organization’s focus on a specific group—serving “its own”—excluded others from receiving aid, and based many restrictions solely on citizenship or race.100 Exclusion from public welfare programs was often part of the impetus for groups such as African-Americans, Mexican immigrants, and Mexican-Americans to establish their own social service organizations.101

Major charities operating in Michigan included the Associated Charities (a member of the Family Welfare Association), the Salvation Army, the League of Catholic Women, the St. Vincent de Paul Society, the Detroit Urban League, and the City Rescue Mission, among others. Cities such as Detroit, Flint, and Grand Rapids had fairly extensive networks of private welfare (although not all provided material relief services), while other more rural areas, including Van Buren County, had far fewer options. Manistee County, in rural northern Michigan, had a county Social Welfare League, and Marquette County a Social Service Bureau, which coordinated social welfare efforts.102 Most counties had

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a chapter of the American Red Cross as well. Some cities, including Detroit and Grand Rapids, coordinated their fund-raising for private charity through the local community chest, which then distributed the funds to its member organizations.\footnote{Lubove, \textit{The Professional Altruist}, 187–88; Brown, \textit{Public Relief}, 55. For information on the Detroit Associated Charities, see Oliver Zunz, \textit{The Changing Face of Inequality: Urbanization, Industrial Development, and Immigrants in Detroit, 1880–1920} (Chicago: University of Chicago Press, 1982), 263–65.} Van Buren County had no centralized social welfare organization. (Saginaw’s private agencies were funded in part by the Saginaw Welfare League.) Some of the state’s midsize cities, including Pontiac, lacked a private family welfare agency even by the 1930s.\footnote{Application for Membership in FWAA, Agency Correspondence, FSA Records, Pontiac, Box 58, Pontiac Folder, 1928–1935, SWHA.}

In some areas private agencies investigated cases for the public welfare system, but the funding was still public. Smaller cities and rural governments funneled their public relief funds through local private agencies, rather than having public officials distribute relief dollars. The Social Service Department of the Civic League in Bay City, which had a population of about fifty thousand in 1921, investigated cases and dispensed city funds for relief. The city also provided office space and supplies for the agency, and paid the salaries of some workers.\footnote{Agency Correspondence, Reports, FSA Records, Bay City, Box 57, Folder, MI prior to 1928, and Folder 1928–1935.}

Manistee’s Social Welfare League coordinated the mothers’ pension program and transient relief.\footnote{Agency Correspondence, Reports, FSA Records, Manistee, Box 57, Folder Michigan, L–Z, 1928–1935.} Jackson’s Welfare Bureau, a private agency, took over the city’s poor-relief work when Jackson abolished the poor-relief department. Instead, it paid the Welfare Bureau’s staff and provided a relief budget.\footnote{Agency Correspondence, Reports, FSA Records, Jackson, Box 57, Folder Michigan, H–Z, MI Prior to 1928.} Flint’s Social Service Bureau investigated cases for the public agency until 1930.\footnote{Consultation Visit, 1933, Rose Porter, Agency Correspondence, Reports, FSA Records, Box 58, Flint folder, 1928–1935, 3.}

The relief options for rural communities were more limited than those of urban areas in Michigan and throughout the nation, although rural welfare practices have received much less study than urban agencies. Few rural areas had chests or welfare leagues to coordinate fund-raising. But they did have private welfare organizations, including the American Red Cross, Salvation Army, and others often connected to local churches. Although the welfare system was less systematic and visible, it did exist. But given that even large cities...
and urban areas found the needy dependent upon public relief funds, such a trend is even more likely in rural communities, where residents often had few choices but to turn to their local officials for aid when they faced unemployment or an inability to support themselves or their families.

Historically, Michigan’s welfare system was local and funded with public monies. New Deal programs continued this practice, but with greater federal and state involvement. What shifted in Michigan was the level of government involved in relief. Private agencies were concentrated in more-urban areas, and even then did not provide significant relief aid. The largest new program in the pre–New Deal years was the mothers’ pension program, which continued the practice of public funding and local administration. Local, public relief was critical for Michigan’s unemployed, both before and during the Great Depression.