SOCIAL SERVICES FOR CHILDREN IN IOWA:

THE FIRST HUNDRED YEARS

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Introduction

 Nearly 120 years ago Iowa was created as a separate political and geographical entity. It became a Territory in 1838 and a State in 1846. Families came to Iowa primarily from Ohio and Indiana. Many of these people or their parents had lived before that in the New England states, in New York and Pennsylvania, while fewer numbers were in Virginia, North Carolina, and Kentucky. By 1838, 21,000 people lived in the western part (Iowa) of the Wisconsin Territory, more than there were in the eastern half. Growth in population in the Iowa Territory and the state was very rapid. In 1870 Iowa had more population than Michigan, another of its parent territories. By 1900 Iowa had nearly 2,000,000 people.1 It does not have many more today.

 In the territorial and state beginnings most of the people came looking for land to claim and to settle. Those able and willing to work could make a living. Survival was dependent on initiative and hard work. Help for people in need was given on a simple neighborly basis as in other pioneer societies, and later provision was made for emergencies to care for people in need because of death, sickness, or the loss of the wage earner, and for children who needed shelter and care.2

The Poor Law

 The provisions made through legal enactment for people in need were derived from the English poor law philosophy, which came to Iowa through the laws of Ohio and Pennsylvania, through the laws adopted by the Governor and Judges of the Northwest Territory in 1790, and the statutes of the Territories of Michigan and Wisconsin. In the First Legislative Assembly of the Iowa Territory (the laws contained in what was known as the “Old Blue Book”) no poor relief statute was enacted. The Wisconsin statute was in force in Iowa Territory. Two years later, in 1840, the Wisconsin Poor Law was re-enacted practically in full by the Legislative Assembly.3

 Conservatism has always characterized Iowa’s administration of its public welfare programs. This is thought to have been due to the New England character of its original settlers, and with the later German additions; the state’s dependence primarily upon a farm economy until very recent years; and the prevalent beliefs in individualism and decentralized governmental organization. The needs of various groups of people for assistance have never been particularly acute, and the needs have been met in certain ways, as will be seen, but only after continual agitation, or unless an occasional crisis forced the issue. In Iowa the average per capita wealth has usually been high and fairly evenly distributed through a homogenous population; a nearly always dominant one political party has perhaps also made for less change.4

 The historical development of the public welfare program and particularly the efforts made in behalf of children will be shown in terms of the group cared for, in what manner this care was given, and how the state has branched out from a system of institutional care into auxiliary services for the people, including children. Over the years the state has developed many functions in public service. The pattern is scattered and non-integrated.

 The first groups for whom the territory provided legal enactment were the criminals and the insane. In 1838-1839, the laws established the first state institution, the penitentiary at Fort Madison, for the care of felons. The other criminals were left to the care of the local communities until later provision was made for other classes of criminals in the state prisons. For the insane, while no care in the state institution was given until 1855, the 1838 law stated that the insane person, if he had no property, was to be cared for by the overseers of the poor (which were in existence in the Wisconsin Territory statute) and “receive the same benefits as in the relief of paupers.”5

 Although the 1838 Assembly did not enact the poor law, it did pass an act requiring the consent of parents in apprenticeship of a child and required a statement as to the length of the term and the procedure in case of misconduct on the part of either party to the agreement.6

 In the “Blue Book,” (Revised Statutes of 1842-1843), the Poor Law appeared following legislative enactment in January, 1840. The principles in the poor law came from the Northwest Territory via Pennsylvania, Michigan, and Wisconsin, and they can all be traced back to their beginnings in England: such principles as requiring a certain length of time of residence in a locality to receive public help, known as legal settlement; and “less eligibility,” wherein people receiving help were given it in ways that were not quite acceptable to most people such as receiving poor relief in the almshouse or receiving none; and the locally administered and locally tax supported relief that was restrictive and not well devised to give sufficient help in any amount to many people. In Iowa, as in other states, the Poor Law was completely locally administered with no supervision or financial or other responsibility by the state. The administrative unit was the county. The township trustees were the overseers of the poor, subject to the general supervision of the County Commissioners (later the Board of Supervisors). The County Commissioners could build poorhouses and levy a poor relief tax. All permanent support was given in the poorhouses, or if there was no poorhouse, the paupers were to be contracted out for a year at a time. Eligibility was one year’s residence in a township without being warned to depart. Children in the poorhouse could be bound out as apprentices until they became of age. Provision was made for the care of needy persons who had settlement in another county or state.7

 The Poor Law followed the historical pattern of the workhouses, binding out of poor children, and contracting the poor to the lowest bidder as the cheapest way, supposedly, to care for them. Idiots and insane were specifically included in the law as were people unable to earn a living because of disability or age.

 It’s brevity, simplicity and comprehensiveness, together with

 its lack of detailed administrative directions mark this law as

 distinctively modern in its nature.8

The law was thought to be readily adaptable to the rapidly changing conditions of a growing territory.

 It was not adaptable for long. Two years later, in 1842, under the influence of the dominant group of former Ohio residents in the legislative assembly, the laws were made extremely complicated and confusing, although it is possible that they may not have worked hardship on the recipients as there were relatively few persons needing assistance. However much the new Poor Law additions were adaptable to a more settled and populous Ohio, in Iowa the confusion of attempting to settle responsibility for the poor on the township resulted in several different kinds of administration. The township system might have worked out fairly well in the counties that had townships but all counties did not. Counties were authorized to build poorhouses but they could not incur debts to do this. Where a poorhouse existed all relief was to be given there with the township trustees having the power to commit persons to it. Where there was no poorhouse, relief was to be given by the overseers of the poor (the trustees) of the township where organized and the township was obliged to finance the relief. With no townships or poorhouse the county was responsible for care and finances, with the contracting out of the care of the poor to the lowest bidder. In 1844, the poor law delegated to the counties the support of the poor, rather than the township, although the township trustees continued as overseers of the poor.9

 In 1851 the administration of poor relief was again changed. The county judges became the administrators and the township trustees continued as the overseers. In 1860 the County Board of Supervisors replaced the judges as the administrative authority while the township trustees continued again as overseers.10 In 1925, after some experiments with city units as well as county units in giving relief, all the function was centered in the county, with the Board of Supervisors being empowered to appoint an overseer of the poor. After the County Departments of Social Welfare were created in 1937, the Boards of Supervisors and the County Boards of Social Welfare may designate the County Director of Social Welfare also to serve as overseer of the poor. This has been done in about half of the 99 counties, although the “integrated” arrangement may not be a permanent one.

 In 1851 a statute provided for the giving of relief to the poor in their own homes if this was as economical as care in the poorhouse. This method was apparently not used often, as in 1868 mandatory outdoor relief was to be given if the overseers believed the poor person should not be sent to the poorhouse. The law limited the amount of relief to $2.00 per week, exclusive of medical care, for the necessities of life. It could be given in cash. The $2.00 amount for relief is still in the poor law.11

Institutional Developments

 The disruption of economic and social conditions during the Civil War aroused public sympathy for the care of the soldiers in the camps and hospitals, and for their dependents at home. This was the first disaster that brought before the public the need for more comprehensive legislation and was the beginning of categorical aid in Iowa. Outdoor relief was provided for the families of soldiers in 1864. Then came a state institution for dependent children, which first took care of the orphans of soldiers, in 1866; then an institution for delinquents in 1868 and another in 1880; for the mentally defective in 1876 and epileptics in 1915; for the blind in 1853 and the deaf in 1855 and the lowering of the ages to include the younger blind and deaf children in 1919; the establishment of state hospitalization for ill children in 1917; and the other state home for dependent and neglected children in 1921.12

 There follows a description of the development of these institutions and others in Iowa, in the counties and in the state, for the care of certain classes of wards. Although county homes were not, of course, provided for through state funds, they were one of the first methods of care for dependent children. Later the county homes came under some semblance of state control.

County Homes

 Early legislation provided for a board of directors for the poorhouse to be appointed by the supervisors except during the years when the county judges were the administrators of relief. This board had full administrative and supervisory power, could hire the caretakers, bind out pauper children, and charge the bills to the county. This elaborate system, derived from Ohio, was designed apparently to prevent political manipulation. It was repealed in 1873. The county home was then placed directly under the management of the county board of supervisors. The Supervisors are in administrative charge of the homes. State supervision over homes in which insane are kept began in 1900, as the authority for this was then given to the Board of Control of State Institutions.13

 Gradually the county home populations were classified better. Those still giving care to the insane were required to provide separate quarters for them. Many of the feebleminded and epileptic, the sick such as tuberculous, and children have been removed from them. The county home has become an institution largely for the care of the aged and physically incapacitated who have no other home.14

 During the depression there were a number of instances where children came back into the protection of the county home when entire family groups were quartered in temporary houses around some county homes. The parents were usually those incompetent to give good care for their children. As time when on these families again became self-supporting or the children were removed from the families’ care.15 In more recent years there have been instances of children being given temporary care in county homes prior to admission to children’s agencies, although this is a practice that many county officials do not wish to undertake.

The Insane

 This group was one of the first provided for as a recognition of the state responsibility and for their removal from the poorhouse. The first state hospital for the insane was built in Mount Pleasant in 1855. It was the second institution west of the Mississippi river, the first being in Fulton, Missouri.16  The institutions founded later were located in Independence, in 1873, and in Clarinda and Cherokee in 1897.17

 Each of the institutions were governed by a separate board of trustees appointed by the governor. The legislature authorized a visiting committee, also appointed by the governor, to visit the institutions for the insane and inspect, to hear complaints, and report to the governor. The committee could make recommendations although the executive authority and responsibility vested with the trustees. The separate boards of trustees continued until the establishment of the Board of Control in 1898. The Board of Control took full administrative charge and the trustees and the visiting committee were abolished.18

 The Healy Committee, appointed by the legislature in 1898 to investigate the state institutions, discovered that many changes should be made in the classification of patients and in business administration. The new Board of Control, in 1900, received legislative authority to parole insane persons, not hitherto permitted, but no follow-up service was provided. The parole guardian and local authorities were to keep in touch with the Board and return the patient, if he still needed institutional care, before he was automatically discharged.19

 Many insane patients continued to be cared for in county homes. In 1873 an act was passed requiring boards of trustees to discharge or order the removal from state hospitals of incurable patients whenever space was required. In 1878 there was wholesale delivery of insane from institutions to county homes.20

 In 1893 there were reported 2,153 in the three state insane asylums. There

 was an estimate of 800 in the poorhouses.21

In 1900 the Board of Control reported 1,280 patients in county homes and 2,354 in state instiutions.22 In that same year the Board of Control was given inspection authority for the care of the insane in county homes so that conditions gradually improved. In 1930 there were 1,530 patients in county homes and 5,740 in state institutions. By 1954, the figures were given as 2,268 and 5,367 respectively.23 There seems to have been a trend in recent years at least to transfer to county homes the senile and incurable patients. There were no special provisions in the mental institutions for the care of the children. Occasionally a child would be sent to one of the institutions and they were of concern to the superintendents because of their having to be cared for with the adult patients. In the past few years the Mental Health Institute, Independence, has provided a children’s program and has cared for children in a segregated manner. The other institutions have occasionally accepted children for care, although preferably children are seen in out-patient services and children may be admitted for short observation periods in specified instances.

The Mentally Defective

 The separate care for the mentally defective in a state institution began later than for the insane. The mentally defective were cared for in the county homes, orphanages, jails, or hospitals for the insane. Repeated pleas to the legislature by governors and institutional heads were made until the state, in 1876, converted one of the former soldiers’ orphans’ homes in Glenwood for the care of the feebleminded children.24 A group of orphans were then transferred to the Home in Davenport, but a few of the inmates were alleged to have remained, and one of the original group was still in the State School in Glenwood in 1953, at the age of ninety-six.

 The institution was founded primarily for the education of feebleminded children rather than for the segregation of the feebleminded group as a whole. The original age range was seven to eighteen years. In 1902 feebleminded women under forty-six years old were admitted, and feebleminded men under the same year of age were admitted seven years later. This age limit was later removed.25

 The power of commitment was given to the district court, not to the juvenile court, and the order of commitment specified the institution to which the person is sent, and the order is given to the Board of Control. In 1915 an institution for the care of epileptics was opened in Woodward, and six years later this institution was permitted to admit feebleminded persons also.26 Ordinarily commitments from the northern half of the state are made to the State Hospital and School, Woodward, while those in the southern half of the state are made to the Glenwood State School. In 1956, the School at Woodward had 1,609 patients, and in Glenwood there were 1,752 patients or a total of 3,361. The total has increased from 2,460 in 1930.27

 In the twenty years prior to the legislative authorization in 1913 for the state institution for epileptics there were many reports of conditions regarding the need for such an institution; one of the superintendents of a state institution in 1900 estimated that there were 3,330 epileptics in Iowa, 1, 943 in poorhouses and 250 in the insane hospitals.28

Psychopathic Hospital

 The State Board of Education, now the Board of Regents, opened in 1922 a modern hospital at the State University of Iowa for instruction in the college of medicine, to provide free care for any citizen of the state in need of mental treatment. The cost of treatment for those unable to pay is borne by a special property tax levy.29 The institution is small and few children can be admitted as it is designed primarily for adults. In 1956 the legislature appropriated a small amount to the Board of Regents for a treatment center for emotionally disturbed children which is not yet in operation. A part of its function is in combination with a research center for the retarded children.

The Blind

 The care and education of the blind early was a concern of the state as it was in the Eastern and Midwestern states following the establishment of the Massachusetts school in 1832. In 1849 the legislative assembly provided a stipend of $50.00 yearly, raised a few years later to $100.00 for the maintenance and instruction of blind residents of “suitable age and capacity” within the state or for care in some institution outside the state. There was no state supervision of applicants or investigation of their needs. In 1853 the School for the Blind (formerly the College for the Blind and now called the Iowa Braille and Sight-Saving School) was opened in Vinton. In 1870 an Industrial Home for the instruction of adult blind was opened in Knoxville; this was closed in 1900.30

 From 1866 to 1897 part of the cost of the education of the blind children in the Vinton School was charged back to the counties but since the latter date the state has supported the school entirely as part of the compulsory education program. From 1898 to 1911 the school was under the management of the Board of Control, and since then has been under the Board of Regents.31 In 1919 the age limit for school admission was increased: from twelve to nineteen years to seven to nineteen years. The blind child must be sent to the school unless mentally or physically disabled or can attend a local public facility for education. Compulsory education is enforced through the juvenile court. The Board of Regents employs a field agent, for both the schools for the blind and the deaf, to discover those who should attend, to enforce the compulsory education law, and assist in promoting the proper training of children with these handicaps.32 The Schools for the blind and for the deaf are much in need of social services as the emphasis is on the academic program with little information available about the child’s emotional and social needs. The chief concern is with children who live in their own homes, and those few who have been removed from parental care and rejected by their parents are little understood in the schools. The schools’ ability to help in finding foster homes or in helping the child to adjust to one are very much lacking.

 In 1926 the state established the Commission for the Blind. Two members are appointed by the Governor and the Superintendent of the State School at Vinton is the third member. The Commission serves to give information and industrial aid to the blind, to stimulate vocational training for the youth and adult blind, to establish workshops to market products and to hold a summer school in Vinton for adult blind. It is a service program for the blind to stimulate better care and support, and students at the end of their school period have been considerably helped by the Commission.33

 Blind pensions were established in 1915. They were given at the discretion of the Boards of Supervisors and the state contributed nothing and had no control. Pensions were given to adults who were totally or almost totally blind and who were without an income of $300.00 per year. There was wide variation in amounts given from county to county.34

 In 1921 the law was passed making it mandatory to treat the eyes of infants to prevent blindness. In 1925 the state made an appropriation for the education of blind youth in the Universities, music schools, normal or professional or vocational schools.35

The Deaf

 The first state provision for the care and education of the deaf and deaf-mutes was in a state institution. This again followed the developments of state schools in Connecticut, in Massachusetts, and other states. The Iowa school was established first in Iowa City in 1855 and in 1864 it was moved to Council Bluffs36 (although a school pamphlet states it was located there in 1870). The School was governed by a separate board of trustees until it came under the Board of Control in 1898. Since 1917, because of its educational character, it has been under the Board of Regents. Similar extension of the age range was provided in 1919 for deaf children as was done in the case of the blind children, and now the School for the Deaf accepts children of kindergarten age. In 1917 provision was made for state aid to local public schools for education of the deaf. Some public school systems have provided special schools or classes for the deaf.37

 The object of the Iowa School for the Deaf is to give a thorough

 elementary and secondary education…for children between the

 ages of five and nineteen years who are too deaf to be properly

 educated in the public hearing schools of the state.38

 The School teaches academic and vocational subjects. Trades for boys are printing, woodworking, upholstering, baking, shoe repairing, painting, metalwork, floriculture, and general shop; for girls the courses are primarily in homemaking.

 The students in 1956 numbered 335. The school maintains a division for the education of deaf-blind children and students are accepted from other states at the expense of the parents. For state residents the school is free except for travel expenses, clothing, unusual medical and dental expenses and hospitalization.39

The Sick

 In 1915 the Perkins Law, enacted by the 36th General Assembly, provided for the care of crippled children by the state. The law stated that a hearing could be held in the juvenile court concerning any child under the age of sixteen “allegedly afflicted with a malady or deformity which could be corrected” and for whom the parents could not afford treatment. The judge could enter an order, with the consent of the parent or guardian, to have the child given treatment in University Hospitals at Iowa City without cost to the parents. The law also stated that patients in the Board of Control institutions could be sent to the University Hospitals for treatment without cost, and without the juvenile court having to make an order.40

 Later, in 1919, the scope of the law was widened to include all persons in need of medical or surgical care and hospital treatment. This was the Haskell-Klaus law. The “hospital papers” are still referred to in the counties by these names. Although other states had made similar provisions for medical care by the state, the Iowa method was unusual and different in that the cost included transportation for all the “county” patients (but not those from the state institutions). The cost is taken care of by the general state levy. The system is administered by the Board of Regents.41

 The state has no control over eligibility for admission. Formerly county attorneys were required to investigate the need of the applicant and report to the juvenile court, which in most counties is the district court. In 1931 the authority for investigation was given to the Boards of Supervisors with the overseer of the poor doing the actual investigation and presenting the report in the form of the admission papers to the court. The juvenile courts control admissions by having been given the power to sign the orders without which the patients cannot be admitted at state expense.42 In 1931 a law provided that expectant mothers could be cared for without charge at University Hospitals as well as their infants.43

 Since 1931 the University Hospitals has established quotas of patients for each county in proportion to population so that the number of patients that can be admitted from each county is controlled in what was regarded as a more equitable manner. If the county exceeds the quota it must pay from the county poor fund for the extra patients at a cost rate for care. Nevertheless there have been inequalities resulting from administration since there are no uniform county standards in relation to eligibility regarding residence and judicial determination. Children’s orthopedic cases are not governed by quota because of the differences in financing by the state and the federal grant-in-aid program.44

 In 1917 the University built a separate children’s hospital. This building has been used for both orthopedic and pediatric departments of the University Hospitals, although in more recent years an addition to the main hospital has housed the pediatric department. In 1937 when the state was to designate an agency to receive funds for the federal program of crippled children’s services, the State Health Department received the money for the program and then designated the Board of Regents through the children’s hospital to administer it. The state funds for crippled children were the state’s required contribution to receive the matching grant from the federal government for this purpose.45

 In 1922 when the federal government made grants-in-aid to the states for maternal and infancy care, in Iowa the Board of Regents was designated as the supervisory agency with the Extension Division, Bureau of Social Welfare, of the University, in charge. This program promoted public health nursing, local interest in welfare problems and better administration of local poor relief as the best means of protecting the welfare of mothers and children. A public health program was establish[ed] in the State Department of Health. After the federal maternal and child health grants-in-aid to the states were resumed in the social security act of 1935, a division in the State Health Department became the branch of the state government having this responsibility.46

 State care for tuberculous patients has been given in a state institution since 1906. The sanatorium, formerly under the administration of the Board of Control, has been under the Board of Regents since 1949. Since 1909 counties have been authorized to erect county sanatoria but only four have been built. It has been the county institutions that have been used primarily for the care and treatment of cases of childhood tuberculosis more than the state institution. Formerly the eligibility of patients for care in the county hospitals and the state institution were determined according to poor relief principles. The law in 1913 required the Boards of Supervisors to provide funds for suitable care and treatment of the tuberculous. These expenditures are no longer considered relief funds but health funds. The funds are used to pay the cost of county patients in the state institution. Counties must give care for a tuberculous person with legal settlement. Those whose settlement cannot be determined are cared for at the state hospital as state charges.47 The inspection powers over county tuberculosis hospitals used to rest with the Board of Control but now this relationship is under the hospital inspection division of the State Department of Health.

 In 1947 the state granted funds to the Board of Regents for the education and rehabilitation of handicapped children in the Hospital-School. The Hospital-School has of course interconnections with University Hospitals and children’s hospital, the State Crippled Children’s Services, and a child welfare unit of the State Department of Social Welfare for foster home placement.

Delinquents

 Institutional care was and has continued to be the chief manner in which the state assumed responsibility for delinquents. In the process of development of care, delinquents were found in the poorhouses, the local jails, and the county jails. The county jails were the first institution for segregation if they may be called that. Jails were established early and were under the supervision of the Boards of Supervisors. They were catch-alls for many types of offenders. Except for the insane and children whose presence are prohibited by law in jails, they still are places where numerous kinds of offenders are kept.48

 A law forbids the detention of juveniles in county jails or other places where adults charged with crimes are kept but there is no inspection of these institutions except by the clerk of the district court and the county attorney or by the grand jury. Some counties do detain children in the county jail, as there is no other place, although in other counties the sheriff may take a juvenile into his home rather than put him in the jail, or there are separate parts of the county jail used for juveniles. In counties over 40,000 population a separate detention home must be maintained although in practice this has not been done in all such counties.49 Formerly the Board of Control was given the right of inspection of county detention homes but since 1937 this power has been delegated to the State Department of Social Welfare, the Division of Child Welfare having this responsibility.

 After the first prison was built in Fort Madison by the state in 1838 to house offenders, another prison was not built until the present Reformatory at Anamosa in 1888 “near the stone quarries.”50 Both prisons were for men. The reformatory was not called that until 1907. In 1900 a part of this prison was set aside for women prisoners and termed the “Iowa Industrial Reformatory for Females.”51 The criminally insane were, and still are, kept in another part of the Anamosa institution. There was some classification between male prisoners sent to the reformatory and the penitentiary beginning in 1907. In this year too the Board of Parole was established. Males between the age of sixteen and thirty who were convicted of a felony for the first time should be committed to the reformatory unless the crime was murder, treason, sodomy or incest. The reformatory for some years has been an institution with a large population of young offenders.52 A separate women’s reformatory was built in 1917 in Rockwell City. In 1930 the Women’s Reformatory had 102 prisoners; the penitentiary 1,235; the Reformatory for Men 1,263. In 1956 the population figures were 70; 1,300; and 865 respectively.53

 During the first years of the penitentiary and the reformatory the wardens were elected by the legislature, and reported to the governor and the legislature. This system was changed when the Board of Control was created in 1898, and it has since been in charge of the three penal instiutions.54

 The first state institution for juvenile delinquents was built at Eldora in 1868. It took care of both boys and girls. The Acts of the 12th General Assembly provided that the Reform School “shall cause such boys and girls…to be instructed in piety and morality, and in such branches of useful knowledge as are adapted to their age and capacity, and in some regular course of labor…as is best suited to their age, strength, disposition and capacity, and as may seem best adapted to secure the reformation and future benefit of the boys and girls.”55

 Thereafter the process of classification and segregation of various kinds of juveniles proceeded slowly. The first separation was made in 1880 when the Iowa Training School for Girls was established in Mitchellville. When the Board of Control was established eight years later it found conditions in the Training school deplorable, there being a conglomerate group of women and girls and even dependent children as young as seven. It was pointed out, in connection with the various reports about the Soldiers’ Orphans’ Home that counties, in trying to avoid paying the per capita support for a dependent child, would have the child sent to one of the Training (or as then known) Reform Schools, as the child there was not charged to the cost of the county, delinquent or not. At the Girls’ Training school the Board of Control was given authority to transfer the older women to the Reformatory and during subsequent legislative enactments the age limits pertaining to commitment and other eligibility requirements have served to segregate the juvenile delinquents more definitely. Girls were not to be committed unless they were at least ten years old (it was younger earlier) and they could be kept in care until they were twenty-one. The same age limits prevail for boys. Transfer of boys in certain cases are permitted from the Training School for Boys to the Reformatory.56

 In the twenty years after the Board of Control was established numerous changes were made to the laws regarding the placement of boys and girls from the Training Schools. It appeared to be a matter of judgment left to the Superintendents in regard to the time the juvenile should be in the School, whether he or she should be returned to his own home, and if he should not because of possible evil influences, the superintendents had the right to “bind out” (these were the words first used) the child to provide for his care, education, maintenance and earnings, until the child should be released from custody by the superintendent and the Board of Control or until he reached the age of twenty-one.57

 In 1906 the legislature provided that the Board of Control be authorized to hire state agents to supervise the boys and girls on parole from the Training Schools. The agents also had charge of the placements of children from the Soldiers’ Orphans’ Home, Davenport. Two such agents were first authorized, and by 1917 there were six. When the Children’s Division of the Board of Control was created in 1925, there were seven state agents58 and these persons were designated as working for the Soldiers’ Orphans’ Home, the State Juvenile Home, the two Training Schools and the Women’s Reformatory. In 1930, six of the agents were working for the two Children’s homes for dependent children and two for the Training Schools. At present, in 1956, there are two agents each for the Boys’ and Girls’ Training Schools who are supervised by the Superintendents of these institutions. They no longer have a direct connection as part of the Children’s Division. The Children’s Division has eight social workers (still called state agents in the law) for the supervision of the children placed in foster homesand in homes from the two state homes for dependent children.[sic: 59]

 In 1930 the Iowa Training School for Boys had 516; in 1956, 302. The Iowa Training School for Girls had 197 in 1930 and 83 in 1956.60

Juvenile Probation

 In 1904 the juvenile courts were created. The district courts were given original jurisdiction to sit on cases of delinquency or dependency and neglect of children who were not in institutions or were not charged with offenses punishable with life imprisonment or death. Definitions were given in the law of what is meant by a delinquent child and a dependent and neglected child, and the procedure for bringing the case before the court, and what the court could do in disposing of the child: in probation, in commitment to state institutions for delinquent or neglected and dependent, or for commitment of the child to the care of a private children’s agency.61

 Originally in the laws, before 1904, the district courts and sometimes the local courts had disposition of these cases. The juvenile court law followed the movement throughout the country in removing juvenile from the same treatment as was given adults, and certain safeguards for the children were provided in the laws.62 The child was not charged with a crime and the hearing was to determine the best plan for the child’s care on the basis of information provided the court through social investigation.63

 In 1930 the National Probation Association made a survey in Iowa at the request of the Children’s Division of the Board of Control. It found no trained probation officer in any county in the state and in most counties there was no officer at all because the law provided no salary except in a few larger cities. The juvenile courts were accomplishing little in preventing delinquency or in helping children before or after institutional experience. Children were often committed to state institutions because officials did not know what else to do with them. Recommendations were made then and later by the Brookings Institution in a 1933 survey that juvenile delinquents should be cared for under the supervision of workers in a state division of child welfare but this was not done. There is little co-ordination between the state and local authorities in dealing with delinquents.64 The law still specifically states the amount of salaries for probation officers and as changes in the law have not kept pace with salary increases for these positions and comparable ones even the large counties have been hampered in hiring personnel. The only relationship between the administration of the juvenile courts and the state is a permissive one where the Division of Child Welfare of the State Department of Social Welfare may be available upon the court’s request for consultation.

Child Welfare

 In the early Poor Laws, as has been pointed out, the separate treatment of children as apart from the dependent classes in general was not definitely made apparent. Children were first provided for in the poorhouses along with other paupers, and later they could be given relief as members of soldiers’ families, or as members of families eligible for general poor relief. Children could be bound out by the supervisors, boys until they were twenty-one, and girls until they were eighteen. The laws never specifically provided that children be kept in the poorhouses, although it was assumed, since there were provisions for educating children in the poorhouse.65

 The Second General Assembly, in 1848, first recognized the possibility of state responsibility for the care of dependent children by instructing its representatives in Congress to try to obtain a donation of five sections of government land in Jones County or Linn County as a perpetual donation for the use of an “Orphan Asylum and Manual Labor School” for the “benefit of poor orphan children and such other indigent persons as should be admitted…as objects of charity.”66 This donation was not obtained.

 In 1863, during the Civil War, there was concern among the soldiers in the camps concerning the care of their children and families at home. At the “Sanitary (Aid Societies) Fair”

in Des Moines in 1863, an appeal was read from 480 soldiers in southern hospitals which stated that they appreciated the help given them but they wondered about their wives and children:

 A severe winter lies before them and we are rent with anxiety as we

 remember their slender resources and our meager and irregular pay.

 Succor them and withhold your charity from us.67

 Earlier reference has been made to the legal provision for outdoor relief for soldiers’ families. The person who is remembered as a leader among the women’s groups to aid the soldiers and their families was Mrs. Annie Wittenmyer, a member of the State Sanitary Commission. She, among others, was instrumental in the establishment of four voluntary homes for the care of the soldiers’ orphans: at Farmington, Glenwood, Cedar Falls, and Davenport. In 1864, children began to be brought to the Civil War soldiers’ camp outside of Davenport, Camp Kinsman. When the home in Farmington was closed two years later the children were brought to Davenport.68 A few years later, the home was closed in Cedar Falls and the children were brought to Davenport.

 Meanwhile the Soldiers’ Orphans’ Asylum Association, organized as a private agency for the care of the soldiers’ orphans, supported the homes through the Sanitary Fairs and voluntary contributions. Mrs. Wittenmyer was responsible for obtaining from the federal government the grant of the land and buildings from Camp Kinsman to the state of Iowa for the purpose of caring for the soldiers’ orphans. The resolution in Congress was presented by the Hon. Hiram Price and it was approved in January, 1866. In the same year the voluntary agency passed into the control of the state.69 In 1949, the legislature named the Soldiers’ Orphans’ Home the Iowa Annie Wittenmyer Home in honor of Mrs. Wittenmyer.

 Iowa was one of nine states to establish special institutions for the care of orphans of the Civil War soldiers. The other states were Minnesota, Illinois, Indiana, Kansas, New Jersey, Ohio, Pennsylvania, Wisconsin, Maine and the District of Columbia. Maine, Pennsylvania, Ohio, Indiana, and Illinois, as well as Iowa, have continued to maintain the children’s homes founded in these states during the Civil War period. Only Iowa among the states was able to obtain federal assistance in the form of a grant of land and buildings.70

 Iowa was one of the few states that did not continue to restrict admission of only children of veterans but opened intake, in 1876, to children of all residents. In the event legal settlement in a county cannot be determined, the state assumes the whole cost of care for the child, as it does also for the children of veterans. These two groups now comprise about one quarter of the present population of 220 children.71 Half of the cost of care of non-veterans children is charged to the child’s county of residence, and the cost is paid from the county institution fund, not the county poor fund.

 This system was devised and perfected in 1924 and 1928. Before that numerous laws were enacted regarding the amount per capita a county was required to pay for care, and, as noted above, counties often sent dependent children to state institutions for the delinquent to avoid paying this cost. In addition, a greater number of children continued to be cared for in the poorhouses as this was regarded as cheaper than sending them to the state institution.72

 The reports of the Governors and boards of trustees for at least twenty-five years, from 1800 [sic] until 1911, were full of complaints about the failure of boards of supervisors to recognize the superior care that could be afforded to children in the state Home. Reports were made of the poor conditions under which children were cared for in the poorhouses. The Governor, in 1876, in urging that other than soldiers’ orphans be cared for in the state Home pointed out that New York had removed all children from the county almshouses to the state asylums.73

 Another reason for extending the admission requirements to children other than just those of soldiers’ orphans was that in 1872 the then two state homes for children, at Glenwood and Davenport, had 718 children, while by 1876 the total in both homes was but 298.74 It was in 1876 that the home in Glenwood was changed from a home for orphan children to that of a state institution for the feebleminded children. Among the fourteen children transferred from Glenwood to Davenport were “Billy” Sunday, the evangelist-to-be, and his brother, Howard. Billy was later apprenticed to a farmer.75

 In 1880 another Governor pointed out that there were 70 children over five years of age in sixteen county poorhouses. He urged the legislature to prevent the placing of children under two years old in the poorhouses. The same Governor repeated his recommendations two years later stating that there were 167 children in poorhouses (number of counties not given). But his recommendations were not carried out.76

 In 1898 the orphans’ home came under the Board of Control. The Board followed a previous Governor’s recommendation to prohibit children being cared for in the county poorhouses. In this year there were 456 children on the daily average cared for at the Soldiers’ Orphans’ Home and the Board pointed out that there were still 76 children in poorhouses in the state.77

 As a result of reducing the cost of care chargeable to the counties to $6.00 per month in 1911 the Board found that the Home was crowded with children who had been sent there by parents with what it regarded as connivance between parents and county officials. The Board members believed that many children were placed in the home as a cheap boarding school and these children could not be placed as the parents would not agree to their placement.78

 It took a long time to work out this difficulty. It had been part of the early philosophy, at least, to regard the Home as a place of education, where children should be trained in the rudiments of work and given an education (and certainly these beliefs are to some extent prevalent today); and this meant that until 1951 this was done on a very restricted basis for a few severely handicapped children or some expenses were paid for children in free homes or work homes.. Since then, more children have been placed in boarding care, the numbers increasing five times and the expenditures from the institution funds six times over 1951.

 The population has risen from 298 in 1876, to 456 in 189879, to 487 in 192480, 589 in 1930, 701 (the high point) in 1933, 388 in 1950, and 220 in 1956.81 Since 1951 there has been considerable effort to effect more placements of children in adoptive homes, foster homes, and own homes. The drop in population is partly due to this and partly too to developments in the provisions for children’s welfare in Iowa in the local counties through child welfare services and Aid to Dependent Children programs.82

 In 1919 the 38th General Assembly authorized the establishment of the State Juvenile Home in Toledo. This was an institution for the care and education of dependent, neglected, delinquent or destitute children.83 In 1925 the superintendent reported at a Quarterly Conference of the Board of Control:

 The genius of the law is capable of a still wider application, in that it reaches that

 child upon whom demoralizing, degenerating, and disintegrating influences have produced an incipient delinquency. The spirit of the law differentiates between a socially delinquent and a criminally delinquent child under fifteen years of age and permits civic forces to readjust the child to a new opportunity in life. This is the attitude assumed generally by juvenile courts, in the commitment of children to this home.84

He went on to explain that in the law the intention for the education of the children was for vocational and industrial education but that frequently children were committed who were unable because of lack of mental ability or poor beginning experiences in school to achieve results according to these ideals.85 There has been a tendency in the juvenile courts to commit the “predelinquent” and the “ones not quite so bad” as would be sent to the Training School for Boys. There are also dependent and neglected children committed. The age limits are school age, about six, to eighteen or twenty-one depending upon the time of release from custody. The majority of children in care is the adolescent group. Presumably in the next few years the function of this Home may change as it is possible there is no need for two state institutions to care for undifferentiated group of dependent and neglected children. It may be that the population will tend more toward the care of the emotionally disturbed child, of a kind who can be cared for in this type of institution (more in numbers than there are now) and (also or) because of its central location in the state the Home could be used as a diagnostic and classification center of the juvenile institutions.

 Population of the Home in 1925 was 172;86 in 1930, 254;87 in 1936, 311 (the high point); in 1950, 179; and in 1956, 180.88

 The Iowa Juvenile Home was one of the last of the long series of state institutions built for the care of certain classes of people in need.

 Commitments to the two state Homes for children are made by the juvenile courts. The majority of children admitted are committed by the courts. The commitments specify the institution, but the Children’s Division of the Board of Control is in charge of intake to both Homes, and not only is sufficient social information now required, which some years ago was not true, but admission of the child to one institution or the other is determined on the basis of the needs of the child and the population situation in each Home, so that courts may be asked to change orders of commitment. According to the law commitments to the Homes are permanent, with the right of adoptive placement, although there are some judges who will, nevertheless, make a restrictive or temporary order, which considering that Iowa has very little to offer in local communities for continued service to families and that very often the child removed from his home and placed in a state institution means that what local resources there are have long since been exhausted, so that such temporary orders are in effect a real disservice toward the child’s future rather than, as the judges may think, a protection to him.

 Placements are made from the two state Homes in co-operation with the Children’s Division. All foster home applications are accepted, investigated, and approved by the Children’s Division staff, and the children placed in the foster homes are supervised by the Children’s Division social workers.

Mother’s Aid

 Mention has been made of the County administration of soldiers’ relief and poor relief. These two methods still exist. They are provided in the counties in separate agencies. The present Aid to Dependent Children’s program replaced the mother’s aid, or widow’s pension, as it was more correctly called, in 1943, as Iowa did not enact the enabling legislation for the federal grants-in-aid at the same time it did for Old Age Assistance and Aid to the Blind. The widow’s pension law dated from 1913. While this was an important development from the point of view of keeping some families together there were defects in administration which made it unsatisfactory and eligibility was very restricted. Again, it was a locally administered program through juvenile courts, in this instance, and it was locally financed by the county. It was not much more liberal than poor relief. Complaints were made about lack of “thorough and scientific investigation,” and the “safeguarding of the counties against bankruptcy from the indiscreet manipulation of awards.”89

 Gillin pointed out in 1914 that Iowa needed higher caliber supervision of public relief, with a state board of charities and county boards to appoint qualified administrators, and a state expert to supervise pension administration for the blind and widows (old age pensions were enacted in 1934). In 1924 the Iowa Child Welfare Commission, a study committee appointed by the Governor to make recommendations for legislative action, recommended joint state-county welfare administration for the provision for all needy persons and a bill was prepared for this but the legislature failed to pass it.90 In 1956, in spite of the administrative state-county organization relating to the categorical assistance programs through the County Departments of Social Welfare (since 1937), many counties still have separate county organizations for poor relief, and all counties have separate soldiers’ relief offices.91

Adoption

 Before 1927 adoption was by deed, as title to a child was given in the same manner as title to a piece of property, and the title was registered in the office of the County Registrar.

 A law regulating adoption (in the Revision of 1860)

 gave the privilege to any person competent to make a will, but consent first had to

 be obtained from one or both of the parents if they were living, and if not then from the mayor if the child lived in a city, or otherwise from the county judge. The instrument of adoption was to be acknowledged and recorded in the same manner as deeds. The relations of an adopted child and its foster parents were to be the same, including the right of inheritance, as between parent and child of lawful birth. In case of maltreatment or neglect on the part of the foster parent an adopted child could be removed by order of the court.92

 In 1927 the adoption law required a court hearing and decree with jurisdiction vested in the courts of record. The Board of Control had no supervision over adoptions except those of its own wards, although the law required nevertheless in the cases of other placements that copies be sent to the Board. The Board had no power except to study the decrees and make reports, and no authority over annulments until after the court might decide to commit the child to the custody of the Board of Control, which was required in the case of an annulment. No investigations were required except what the court might inquire about from attorneys and the parties at the time of the hearing on the petition; the six month’s probationary period could be waived at the discretion of the court. The Board of Control had been given in 1925 some regulatory power over some sources of adoptions through the right of inspection and licensing of private child-placing agencies and maternity hospitals. These powers and duties were transferred to the Department of Social Welfare in 1937, including the Department’s taking custody of the child in annulment.

 The adoption law was revised in 1947 to provide better methods of investigation along with a year’s probationary period among other requirements, which resulted in improvement in adoptions.93

State Licensing

 In 1925 the Board of control, in addition to licensing child-placing and child-caring agencies and maternity hospitals, was given the power to inspect and license children’s boarding homes where two or more children were kept. The juvenile court law was amended to prohibit the courts from sending children to private agencies unless the agency was approved by the Board of Control. Agents of the Board were to make at least semi-annual visits, to make reports to the Board on the child population, health regulations, and finances of the private children’s agencies. This placed broad responsibilities in a state agency to improve the quality of foster care given children and in safeguarding custody and placements of children. Unfortunately the Board’s Children’s Division was given insufficient funds to administer its responsibilities over these wide areas.94 These functions were likewise transferred to the State Department of Social Welfare in 1937. There has been an increasing amount of money and more staff provided the Department by the state and by the federal government in the ensuing years. Insofar as boarding home supervision is concerned, however, the law remains unchanged regarding the regulation of homes that give care to less than two children in a foster boarding home.

Interstate Traffic in Children

 Many children were brought to Iowa for foster home care beginning in 1853 by the New York Children’s Aid Society under Charles Loring Brace.95 Various estimates of the number have been made, and probably no one knows exactly, although Iowa is said to have received about 4,500 children during the late 1800’s. Several older Iowa residents have described to the author about how they were inspected on the court house steps in Cedar County, Linn County, and Washington County by groups of strangers, one couple eventually choosing them because they liked their looks; and how they felt at being the object of this public “auction;” and how they felt themselves fortunate in their chance choice of foster parents.

 While there was considerable concern among the private agencies and the state institution personnel regarding the competition provided by the Eastern children, Iowa did not prohibit by law the importation of a child without previous notice to the Board of Control until 1925; exportation without like notice was also then prohibited. The state did, in 1909, require the posting of a bond by an out-of-state agency to prevent children from becoming a public charge.96 The exportation regulation was provided in the Iowa law in 1925 and it was then one of the few states that did so. Other Midwestern states, notably Michigan and Minnesota, regulated importation of children much earlier than Iowa.97 In 1937 this regulatory function was transferred from the Board of Control to the State Department of Social Welfare.

Child Labor

 The Department of Labor has the responsibility for enforcement of child labor laws but there is little field service to make it effective. Labor permits are issued to children by the local superintendents of schools on forms provided by the Department of Public Instruction (now Education), one copy being filed with the Commissioner of Labor. All local, city, county, and school officials are required to notify the Commissioner of violations and county attorneys are required to prosecute violations but there is great diversity of enforcement and no centralized service for administration in a responsible state agency.98

Vocational Rehabilitation

 A State Division of Vocational Rehabilitation was created in 1920 under the Board of Vocational Education, now the State Department of Education, to co-operate with the federal government in providing this type of service to adults and older children in need of such service. It developed training programs for selected young persons and has helped in their placement in suitable employment after training. It was handicapped by having limited funds until after the passage of the social security act in 1935, and in recent years with expanded state and federal grants it has been providing a real service to many handicapped older children, both the physically handicapped (and in even more recent years) to some of the mentally handicapped.99

Unified State Control

 In other states, first in Massachusetts in 1863, state regulation of institutions and public programs for the care of children came under a unifying state board long before this development took place in Iowa. There were reports by the Governors to the legislatures in the late 1880’s and 1890’s urging such regulation.100

 The first attempt at state regulation of institutions in Iowa, in a sense, was the provision of visiting committees responsible for checking on the care of the insane under the system of local boards and trustees. From the time of the founding of the several state institutions each had its own board of trustees with a great diversity of administration. There was an unsuccessful attempt to get the visiting committees made applicable to all the institutions. The committees were abolished when the Board of Control was established in 1898. In that year a special legislative committee, the Healy Committee, investigated the state institutions and reported to the legislature. It recommended doing away with the separate governing boards in the interests of better business management, classification of inmates, and the exchange of information and co-ordinated efforts instead of competition for funds between institutions.101

 There was much opposition to the proposal for a centralized governing board because of the fear of the curbing of the power of the institution heads who had assumed functions that should have belonged properly to members of the boards of trustees.

 The Board of Control of State Institutions was created in 1898. It is subject to investigation and maintains relationships with the legislature through the legislative committee now known as the Budget and Financial Control Committee (popularly and erroneously known as the “Interim Committee”). The Governor has the power to appoint a special committee, however, if he so desires, to investigate the Board of Control.102

 The Board consists of three members, appointed by the Governor with the consent of two-thirds of the senate, for terms of six years. One member’s term expires every two years. The members shall not all represent the same political party nor shall more than one be from the same Congressional district. It has been practice, since the Republican party is usually in power and the Governor of the same party having the appointive power, that two members are Republicans and one a Democrat.

 At first the salary was $3,000 per year and it is now $6,000. The members are required to devote their entire time to their administrative board membership, and they are prohibited from holding another office. They are subject to removal by the Governor with the consent of the senate for cause, which is not specifically stated. The Board was given full power to contract for, control and govern the state institutions. The Board has the power to appoint the heads of the institutions and set standards for personnel but not to appoint the personnel as that is left to the institution head. The Board may not interfere with appointments of institution heads, that being a criminal offense to interfere with or attempt to influence appointments. This was apparently set up in the law to prevent the possible creation of a political machine.

 In practice the Board members have divided every two years the responsibility of visitation and taking care of the business of certain institutions, and the entire Board confers on general matters or in relation to particular situations of any of the institutions. The Board employs an executive secretary.

 In 1898 this administrative arrangement was regarded as an advanced method of organization. The first reports of the Board showed extensive accomplishments in business management, centralized purchasing, personnel regulation and salary schedules.103

 From the first, the law required the Board to hold quarterly conferences (a method referred to in an early meeting as a derivative from the practice of the Methodist Church) and the meetings were regarded as a method of establishing co-operation, understanding, exchange of information, and better classification of wards. At the meetings through the years papers have been presented by institution heads, staff members, board members, board office personnel – consultants on mental health, dietary, building improvement, auditing, purchasing, farm management, child care and placing – and by persons not employees but who were experts in various fields from in and out of the state. The law also provides that the Board shall encourage institution heads to study and investigate the best methods of service in their fields, and secure for the superintendent’s information so that the best management and treatment may be provided.104

 The Board must make semi-annual inspections of each institution. It inspects the dietary, sees inmates and gives them the opportunity to talk with the Board members apart from staff. It has the power to classify wards and transfer them between institutions as may be necessary for the welfare of wards and the institution population. It can also investigate, on recommendation of the superintendent, any questionable commitment and either transfer or discharge those found not suitable for the institution.

 In areas other than the immediate concern with institutional management, the division under the Board to be given the power of outside relationships to local communities was the Children’s Division, created in 1925. In 1947 qualifications and duties of the director of child welfare were set up, and in that year also the Board was authorized to appoint directors of mental institutions, of the corrective institutions, and of the prison industries.105 The board has employed since 1925 a director of psychological services, when in that year the law provided that the Board should arrange for tests and measurements and to classify children. The Child Welfare Research station of the State University of Iowa, created in 1917, was for the purpose of investigating the “best scientific methods concerning the development of the normal child.”106 The Board of Control and the Child Welfare Research Station worked out a co-operative arrangement for a Station staff member to serve as consulting psychologist. This arrangement prevailed until 1950 when the director of psychological services in the Board’s central office was appointed to serve solely the wards of the Board of Control.

 The Iowa Child Welfare Commission of 1924 traced its development through the White House Conferences of 1909 and 1920, and pointed out the similar developments in other states regarding child welfare legislative commissions. The commission was appointed late in 1923 by Governor Kendall and the Governor presented the Commission’s report early in the legislative session of 1925.107

 The Commission studied juvenile delinquency, local relief administration, abuse of children, broken homes, negligence in the adoption of children, problems of the feebleminded, and the state institutions for the care of children. It made recommendations for administration through a Children’s Division (called a Bureau of Child Welfare) in the Board of Control, in regard to illegitimacy laws, compulsory education, laws relating to dependency, neglect, delinquency and juvenile court provisions. It recommended the Children’s Division, county public welfare boards, licensing of child-placing agencies, maternity hospitals, boarding homes, revising adoption laws, transferring from juvenile courts the administration of widow’s pensions; for the better care of illegitimate children; for better supervision of the feebleminded; and for amendments to the marriage law.108 Ten bills were proposed and four were passed by the legislature in 1925; and the fifth, the adoption bill, in 1927. The first four bills provided for the Children’s Division, and the licensing of child-placing agencies, maternity hospitals and children’s boarding homes.109

 The supervision of child welfare by the state agency – the Children’s Division of the Board of Control – was very comprehensive in scope and it might have resulted in a strong division of public welfare had it had sufficient funds and personnel.110

 Under the law the Division was given the responsibility for rehabilitation of disrupted families, enforcement of all laws regarding delinquent children and co-operation with juvenile courts and all reputable child-placing agencies; advice and aid to boards of supervisors in performing their duties in relation to children and in taking the initiative in behalf of children who were not provided for. The Division was authorized to obtain tests, measurements and examinations for the purpose of securing better classification, treatment and disposition of children in institutions, to study the causes of dependency and defectiveness and report to the legislature with recommendations for better protective legislation. In performance of these duties the Board of Control could obtain the assistance of other state departments, including the services of the State University Hospitals and the Extension Division of the University.111 The work was to be under the direct supervision of a superintendent of child welfare (later Director of the Children’s Division) appointed by the Board, but no personnel standards were set by law (this was done in 1947). The superintendent was given little freedom of action; the agents for the placement of state institution children, provided in the law of 1906, became by administrative decision agents for the Children’s Division, but since the law did not specifically provide this, the Board continued to appoint them. The agents had a dual loyalty to the Board which appointed them and to the superintendent of child welfare who supervised their work. Conflict inevitably resulted and hampered the successful development of the program. Agents were chiefly political appointees without regard for qualifications in child welfare. In a study by the United States Children’s Bureau in 1930, as one of the states to be studied in connection with the 1930 White House Conference, the above difficulties were pointed out.112 Most of all there was lack of money and insufficient qualified personnel to undertake the administration of a wide variety of child protective and administrative functions in a state department that had a $5,000.00 budget, as compared to $60,000 in Minnesota and $37,000 in Wisconsin for comparable programs at the same period.113

 In this survey, and that of the Brookings Institution two years later, in 1933, much the same recommendations were made for state administrative re-organization. A department of public welfare was recommended to integrate the diversity of functions that had grown up throughout the years into a vast decentralized and unco-ordinated arrangement. An advisory committee, appointed by the Governor was to be selected, and a single administrator was to be appointed by the Board on the basis of qualifications. The department was to take over all the functions of the Board of Control, Board of Eugenics, Board of Parole, Commission for the Blind, the Emergency Relief Administration, and the Bureau of Social Welfare of the Extension Division of the University. Duties were to be classified in a Division of Child Welfare, Division of Mental Hygiene, Division of Corrections, Division of the Handicapped, Division of Industries and Equipment, and a Division of Research and Statistics.114

 County departments of public welfare were recommended, with the boards of supervisors to be the local county public welfare boards. The county board would appoint the county administrator from candidates selected on a merit basis. The county office would administer all forms of outdoor relief: soldiers’ relief, blind pensions, widows’ pensions, and medical care for the University Hospitals, administer child welfare, and supervise all persons paroled from state institutions; issue labor permits for child labor and operate an employment bureau; co-ordinate the work of public and private welfare agencies. These recommendations were presented to a special session of the legislature in 1934 and were tabled in committee without public hearings.115

 Some of the recommendations were carried out in the creation of the State Department of Social Welfare and its local county administrative system in 1937. This department originally had the advisory board and the single administrator set up, but not for long, for in 1939 the State Board of Social Welfare reverted to the more familiar Iowa pattern of three administrative, paid, board members; and in subsequent years the single administrator has likewise disappeared among a number of division heads of equal authority.

Public Child Welfare Services

 The superintendent of the Children’s Division, Board of Control, wrote the first state plan for child welfare services in April, 1936. The plan covered the remaining three months of that fiscal year. The budget for the next fiscal year was $10,141.39 for July, 1936, to July, 1937, the amount including the federal grant and a small amount of local funds. The amount of the state participation was $5,000, no larger an amount than had been given to the Children’s Division for some previous years, to administer somewhat the same functions, and no larger an amount than was granted for child welfare services until the end of the fiscal year in 1939.116

 The Children’s Division of the Board of Control administered the federal-state plan for child welfare services in Iowa until the creation of the State Department of Social Welfare in 1937. The first plan divided the state into four large districts with district headquarters. Consultant services on child welfare problems was extended to the rural counties in each district and offered direct service in demonstration counties: Monroe County and a two county unit in Fremont and Page counties. Along with the development in rural counties, the state department extended child welfare services to urban counties by using state funds alone.117

 In the plan the previously described activities of the Children’s Division were continued, as they related to the placement of children from the two state children’s homes at Davenport and Toledo; and the licensing of private children’s agencies, of children’s boarding homes and of maternity hospitals.118

 In addition, a third function was established: a training unit for the recruitment of staff by giving training in child welfare techniques to those who have had “a basic training in the Social Welfare Field, as well as offering an opportunity for field training to students in the School of Social Administration at the State University.”119 This training unit was discontinued when the School of Social Administration was closed in 1941.

 The plan included a mental hygiene unit to provide for “tests, measurements, and diagnosis as well as render assistance in making individual plans for children.120 Psychological services have since been provided by the State Department of Social Welfare in the Division of Child Welfare.

 The plan, and its development from April, 1936, to July, 1937, envisioned large responsibilities for community interpretation and inter-agency co-operation; the development of foster home care in the local counties; child protective services for the neglected, the physically handicapped and children of unmarried mothers; services to courts and probation service; assisting schools in attendance and conduct problems; and assisting state institutions for children with admissions and after care. In that year, “92 counties asked for and received assistance and about 1,300 cases have been given some type of service.”121

 From 1937 the Division of Child Welfare in the Department of Social Welfare has continued the functions of child welfare services in the counties. In five years twenty-eight counties had child welfare workers. A positive development was seen in that more county officials seemed to understand the need for local services to children.122 Another trend is shown in the fact that the appropriations for this purely service program to children were increased year by year: the biennial appropriations for 1937-1939 were $5,000 per year; for 1939-1941, $75,000 per year; for 1941-1943, $115,000 per year.123 In the 1955-1957 fiscal years the biennial appropriation was $250,000 per year.124

 In addition to the child welfare services in certain rural counties, consultant service was provided to other counties, to private child-placing agencies in service areas other than merely routine inspection for licensing, and for the purpose of licensing children’s boarding homes, day care centers, and maternity hospitals.

 After the separation of function between the Division of Child Welfare and the Board of Control’s Children’s Division, the latter was concerned with the placements of children from the two state children’s Homes.

 The Bureau of Social Welfare of the Extension Division of the State University of Iowa was the originator of the “Iowa Plan” for organizing county welfare work. It attracted much interest outside the state, according to the report of 1930, “Social Welfare in Iowa.”125 This agency was an early development, along with the provision of the state agents by the Board of Control in a lesser degree, of a reaching out by a branch of the state government to developing leadership and strengthening of the local preventive and rehabilitative services. The Bureau was designed to study social problems, gather data on methods of relieving them, act as a consultant with county boards of supervisors on the problems, and serve other state departments when called upon to do so. The Bureau was staffed with social workers who aided in the building of sound county welfare services.

 The Iowa Plan for County Organization for Social Welfare was a combination of public and private resources under the direction of a person skilled in social work. Private agencies were used that were already developed in some of the urban areas, and in the rural areas these were adapted to the settings until there were, prior to 1933, 28 counties with such public-private welfare agencies. They were variously called the Social Service League or the County Bureau of Social Service.

 The University Bureau guided and stimulated this movement and set professional standards, secured qualified personnel, interested lay groups and public officials. When the depression of the 1930’s came the Bureau of Social Welfare became a closed chapter. The activities were pooled with the State Emergency Relief Administration. In the counties having private agencies like the Social Service Leagues, they ceased to operate and to raise private funds after the advent of state and federal relief. In some counties the boards continued as advisory committees of interested citizens. The staffs of the local bureaus went to work for the state or county relief administrations.126

Conclusions

 Iowa began its programs to aid people with local administration and developed its services in the local communities under the guidance of local officials. Financing has continued through the years in the counties from the poor fund levy. While the state has created new powers and duties in an expanding concept of public service for a variety of social problems and groups of people, the county has remained as the primary unit for administration and of finance.

 From statehood the state assumed the financial support of criminals in its prisons, of children in the training schools, of soldiers’ orphans in children’s homes, of non-resident insane, and for the education of the blind and deaf. The support of certain classes of dependents continued with the county: the insane, the feebleminded, and the dependent and neglected children (shared with the state in institutions, and totally or partially by the counties or in private agencies).

 The administration of welfare functions by the state has continued to be the “three-legged critter” that an editorial in the Des Moines Register of May 21, 1937 described: the categorical programs for the old-age and blind (that for dependent children being added later in 1943) and child welfare services in the Department of Social Welfare; the administration of the state institutions in the Board of Control; and the local counties administration for general relief.

 By 1933, the Brookings Institution report charged that, “Iowa has not increased its facilities but only kept in touch with the needs through surveys.”127

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