RUSSEL SAGE FOUNDATION. SOCIAL WORK IN HOSPITALS: A CONTRIBUTION TO PROGRESSIVE MEDICINE

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Russel Sage Foundation. Social Work in Hospitals: A Contribution to Progressive Medicine by Ida M. Cannon

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IDA M. CANNON

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RUSSELL SAGE FOUNDATION

SOCIAL WORK IN HOSPITALS

A CONTRIBUTION TO PROGRESSIVE MEDICINE

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TO DR. RICHARD C. CABOT whose insight, constructive imagination and fearless pioneer spirit have been the chief factors in starting and bringing to its present status in this country, organized hospital social service.



PREFACE

IN THE winter of 1912 I had the interesting opportunity of visiting most of the hospital social service departments in this country. At that time I was impressed by the variety of types of organization, by the diversities in the interpretations of the hospital social worker's function, and by the great need for more adequately trained workers. In every department the paid workers were women. It was interesting to note, however, that in some instances men-especially medical students-were being drawn into volunteer service. I was even more impressed with the widespread interest that I found among physicians, hospital authorities, and lay people, in this new conception of the hospital's social responsibilities. If hospital authorities and physicians are persuaded that social work is needed as part of thorough treatment of the sick, surely the workers, in spite of their handicaps in training, in spite of the lack of standardization in their case work and in their organization, are meeting, nevertheless, a real need. Every department I visited seemed to me pervaded by a genuine spirit of service. Eagerness for information concerning all phases of the hospital's social problems was also

PREFACE

notable among those actually engaged in the work. This very general desire and evident need for exchange of experience and for a more conscious and consistent effort to establish standards, has made it seem worth while to present this preliminary survey of the present status of hospital social work.

Suggestions have come to me from workers in various existing departments and from an interesting personal experience. To make acknowledgment to all who are responsible for material presented in this book would be impossible. The material has come to me in some instances unconsciously, but more often with the most generous spirit of helpfulness from hospital social workers, from physicians and institution executives, and also from many other friends of social service,—among them the patients themselves.

I am indebted to my sister, Cornelia James Cannon, and to Miss Elizabeth V. H. Richards, Head Worker of the Social Service Department of the Boston Dispensary, with whom many of the subjects in this little book have been discussed.

Especially am I under obligation to Dr. Richard C. Cabot, whose stimulating leadership I have enjoyed for six years. He has read the manuscript and made invaluable suggestions. I am indebted also to Miss Mary E. Richmond, without whose stimulus and interest the book would not have been attempted.

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