

THE HOMELESS MAN ON SKID ROW

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A Research Report on  
Housing and Home Finance Agency Demonstration Project  
Number III.D-1

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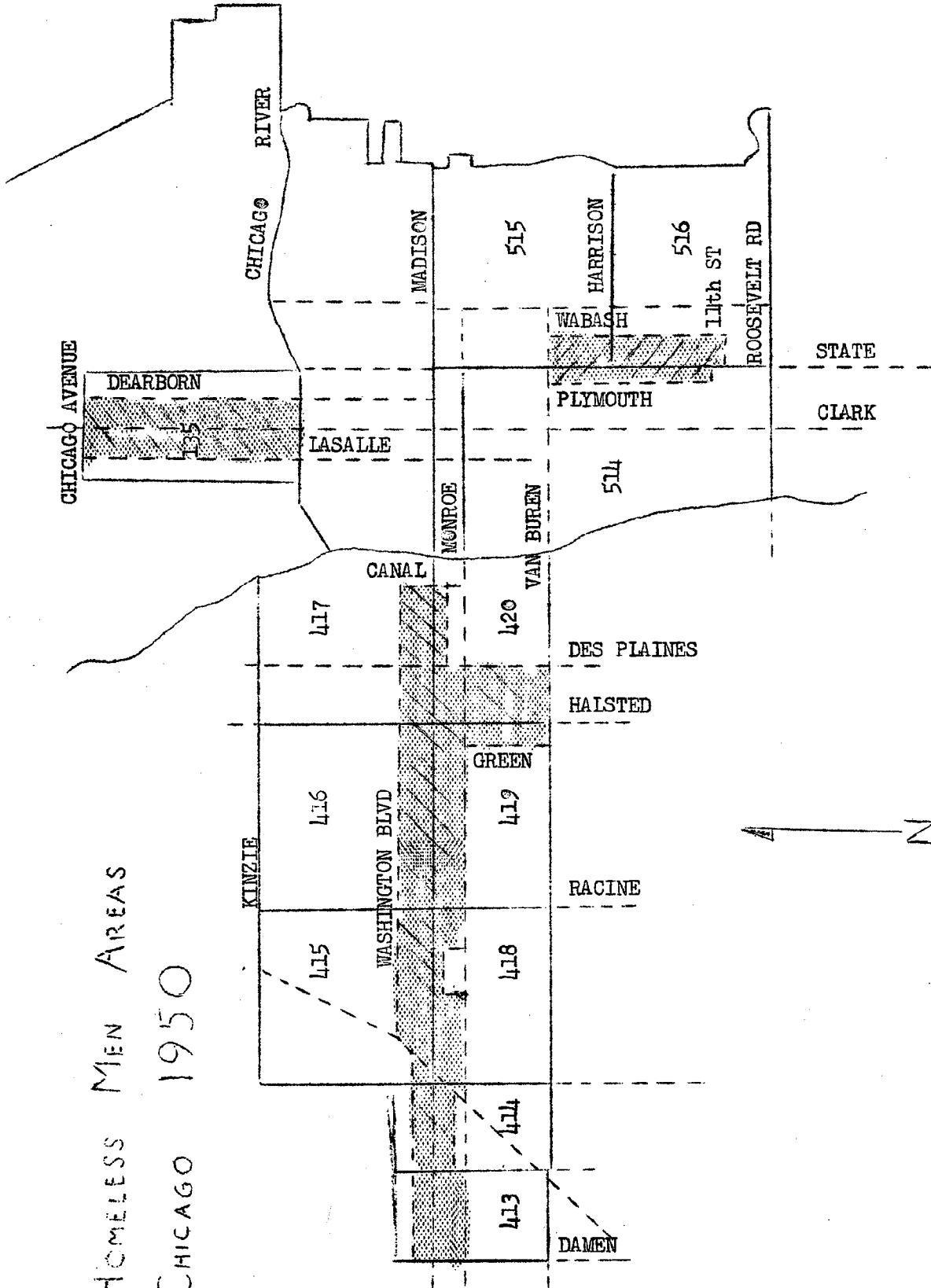
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HOMELESS MEN AREAS

CHICAGO 1950



## Chapter 1

### THE SKID ROW NEIGHBORHOODS IN AMERICAN CITIES

Introduction to the study. A cynic might observe that one of the symptoms which a large American city displays as it becomes an important metropolis is that it develops a Skid Row. The term "Skid Row" has come to denote a neighborhood in the city where there is a concentration of hotels and rooming houses charging very low rates and catering exclusively to men with low incomes--these hotels are intermingled with numerous taverns, employment agencies offering jobs as unskilled laborers, restaurants serving low-cost meals, second hand stores, missions that provide a free meal after the sermon, and perhaps barber colleges, burlesque shows or night clubs with strip tease acts, and stores selling mens work clothing. Most frequently the Skid Row is located near the Central Business District and also near major heavy transportation facilities such as a waterfront, freight yards, or a passenger depot. On some of the larger and older Skid Rows, the most common type of lodging places are hotels that have cubicles instead of rooms.<sup>1</sup> The occupants of these cubicle-type hotels often refer to their living quarters as "cages" or "cubes" and to the establishment as a "cage hotel" or a "flophouse." In 1958 the price of a "flop" in Chicago (cost of a night's lodging) varied from 60 cents to 90 cents depending upon the location of the cubicle within the hotel (those located around the outside walls and with a window bring higher prices and those on some floors are quieter than others), the physical condition of the hotel, the lobby facilities provided, the size of the cubicles (some are larger than others), and the pricing policy of the management. All cubicle hotels on Skid Rows offer attractive weekly rates, ranging from \$3.50 to \$5.50 per week.

Traditionally, Skid Rows have been primarily communities of men; women have been found only at the fringes and in some of the smaller rooming houses, in the taverns as "B-girls," and in a few hotels where men guests can come and go freely at all hours and where couples are accepted without expecting them to be traveling with luggage. A great variety of men reside in these unique neighborhoods. It is believed that among the Skid Row population there are extraordinarily large proportions of:

- Unskilled workingmen
- Chronic alcoholics
- Migratory workers
- Physically disabled men who once were "blue collar" workers
- Elderly men living on public assistance
- Destitute men without work and without funds
- "Bums" and "mission stiffs"--men physically capable of working but who prefer to beg or live off missions.

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<sup>1</sup>A cubicle is a small enclosure (usually 5 feet by 7 feet) with partitions of thin plasterboard instead of walls. These partitions extend to a height of about seven feet above the floor, and extend only to within six inches or so off the floor. The open space above the cubicle is covered with chicken wire, to provide ventilation and prevent theft. The open spaces at top and bottom permit air to circulate, thereby making it possible to heat the spaces cheaply by means of overhead radiators. This arrangement permits the management to accommodate large numbers of guests within a small space, and at extremely low out-of-pocket costs. Cubicle hotels may be converted from old warehouses or other roomy old buildings. Many of them occupy the floors above a store, factory, or other commercial establishment occupying the ground floor.



Three conditions which the Skid Row residents share, and which serve to distinguish them from other communities within the city are:

- (a) They are "homeless." They live outside private households and have no family life.
- (b) They are poor. Many work only very irregularly and receive low rates of pay. For these reasons, they are at the bottom of the income scale.
- (c) They have acute personal problems. With respect to society at large and in their interpersonal relations, many are poorly adjusted. This maladjustment finds preponderant expression in chronic alcoholism and heavy daily drinking, and in withdrawal from conventional family living.

It would be incorrect to contend that every inhabitant of these areas possesses all three of these characteristics, just as it would be incorrect to contend that residents of other areas do not have any of these traits. But these three conditions seem simultaneously to afflict persons more frequently in this neighborhood of the city than in any other. Thus, Skid Row may be identified not only in terms of the kinds of hotels, taverns, and other facilities found there, but also in terms of the unique type of social environment built upon this common social denominator.

Residents of Skid Row are the most poorly housed group in the American population. (The "normal" population would refuse to live in the housing occupied by these persons.) Here the incidence of disease, neglect, and cruel living conditions are far higher than in almost any other segment of the population. This situation is due to a combination of circumstances, most of them impersonal. Because they represent urban living at its worst, city planners, welfare workers, housing experts, and urban renewal administrators have realized they cannot ignore Skid Rows, but must consider "doing something about them."<sup>1</sup>

This monograph reports the findings of a research project intended (a) to supply much of the information and principles necessary to undertake redevelopment action in Skid Row neighborhoods and (b) to yield basic knowledge that would be of importance in developing more profound sociological theories. The work was

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<sup>1</sup>The task of planning for the redevelopment of such areas is especially difficult, however. On the one hand, the condition to be remedied is more acute, more complex, and beset with more problem situations than in most other neighborhoods undergoing urban renewal. On the other hand, less is known about these areas, and the people who live in them, than is the case for most of the other communities of our cities. Because a high proportion of the residents are problem citizens, they may be expected to react differently to urban renewal processes from "normal" citizens living in private households. Urban renewal programs may expect to find little support or cooperation from a large share of the population involved. Many of the positive factors necessary to accomplish organized community living are lacking. Under these conditions, redevelopment procedures that are effective elsewhere may be completely ineffective here and may accomplish little toward raising the level of life of the residents. In fact, they may do little more than cause the Skid Row community to move to a new location within the city, or perhaps to scatter its residents through several adjoining neighborhoods that are loath to receive them.

undertaken at the National Opinion Research Center as a contract with the City of Chicago to help carry out a Demonstration Project ("314") grant from the Housing and Home Finance Agency to develop procedures and suggestions for renewing Skid Row areas. It was sponsored by a committee consisting of the heads of all leading public and private agencies in Chicago directly connected with Skid Rows and their problems. (For a list of members of this general advisory committee and of two technical subcommittees, see Pages iii-v.)

#### A GENERAL LOOK AT SKID ROW NEIGHBORHOODS IN FORTY-FIVE AMERICAN CITIES

Early in the planning of this study, letters were addressed to responsible officials in all cities of 50,000 or more, inquiring whether a Skid Row is present in that city, and, if so, where it is located. In response to these inquiries, and as a result of other explorations, Skid Row developments were reported or inferred for about 50 cities. The locations of the Skid Row neighborhoods in each city were plotted on maps. Of these cities, the Bureau of the Census had prepared statistics of population and housing for census tracts in 45 of the cities. The census tracts in which the Skid Row communities lie were identified, and the data for these areas were analyzed to determine how they differ from the city as a whole. (Special tabulations by the Bureau of the Census made this analysis possible.)

In Appendix B of this monograph will be found a set of indexes and rates computed from census data that permit comparisons between the Skid Row areas and the city containing them for the 45 cities for which information was available. Where possible, these indexes are calculated for both 1940 and 1950, in order to show change in Skid Row in comparison with change in the city as a whole. The reader interested in the characteristics of Skid Row in a particular city should consult this appendix.

The object of the present chapter is to take a general look at these 45 sets of data, and to try to abstract from them a generalized picture of what Skid Rows are like. This has been done by constructing a "typical Skid Row," which is simply an arithmetic average of the indexes for the 45 places.<sup>1</sup>

Number of homeless men. An exact estimate of the number of homeless men living on Skid Rows cannot be made from available census data. However, an approximate estimate of the total number of homeless people (including both men and women of all levels of income) can be computed. This can be done by calculating the number of civilian persons living outside regular households but not in institutions. This estimate will include persons who live permanently in hotels or rooming houses that have five lodgers or more--irrespective of the price paid for accommodations. Such estimates are reported for each of the 45 cities in the table of Appendix B, and also in Table 1-1. These statistics can be used as a rough guide to indicate the approximate size of Skid Rows, but are

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<sup>1</sup>The reader should remember that these data refer to whole census tracts, which usually cover several city blocks. This means that the census tracts containing Skid Row neighborhoods also contain much population that does not live in Skid Row lodgings. Hence, the data presented here refer to the general situation in which Skid Rows are found, and only indirectly to the characteristics of Skid Rows and Skid Row residents themselves. Some census data for Skid Row populations of Chicago will be presented to help fill this gap.

Table 1-1: Selected Population and Housing Characteristics of Census Tracts  
Containing Skid Rows, 45 Cities of the United States, 1950.

City	Esti- mated number of home- less persons (000) (a)	Change in percent non- white (b)	Percent having 6 years or less of school	Percent unem- ployed	Percent earning less than \$1,500 in 1949	Percent of dwel- ling units sub- stan- dard	Percent of dwel- ling units built before 1920	Percent of dwelling units with 1.51 or more persons per room
Average, Skid Row..	4.7	3.0	30.3	14.7	48.7	54.2	83.8	13.0
Average city.....	...	...	17.3	5.7	26.9	19.2	50.9	4.7
Chicago.....	20.8	12.6	30.3	16.6	43.8	77.6	94.8	29.8
San Francisco.....	18.5	4.6	28.9	30.3	58.1	45.5	90.2	8.3
Los Angeles.....	16.0	7.9	23.5	24.5	57.8	61.1	89.4	13.8
Detroit.....	13.0	-2.6	32.7	13.4	44.9	47.8	83.6	13.0
New York.....	11.4	0.0	42.8	15.6	43.9	32.6	90.9	6.3
Washington, D.C....	8.7	3.6	39.1	7.0	41.8	45.6	86.3	17.9
Seattle.....	7.4	0.2	22.1	34.6	51.9	78.0	92.7	10.1
Denver.....	7.3	2.5	25.1	17.4	55.2	70.1	84.4	22.5
Portland.....	6.8	-2.7	23.2	23.4	59.0	61.5	89.5	6.4
Boston.....	6.3	3.9	31.2	15.7	49.4	47.6	98.8	6.6
Minneapolis.....	6.1	0.7	26.7	24.1	60.4	52.4	97.6	9.0
Milwaukee.....	6.0	4.0	22.7	6.1	33.0	41.6	82.8	10.8
Pittsburgh.....	5.9	8.2	34.5	12.3	42.2	59.5	83.1	11.2
Oakland.....	5.8	23.9	32.0	23.5	43.7	45.9	80.0	12.6
Sacramento.....	5.4	...	33.7	32.8	58.1	51.7	86.8	15.0
Cincinnati.....	5.4	-3.2	37.3	12.9	48.4	83.4	96.4	20.3
St. Louis.....	4.6	-3.9	27.1	14.7	56.1	87.8	96.9	27.8
Miami.....	4.3	...	12.7	8.0	40.6	9.9	14.8	3.6
Buffalo.....	4.2	13.6	38.3	27.3	55.3	44.5	92.6	4.7
Omaha.....	4.1	...	18.3	7.1	43.2	50.9	83.1	11.6
Houston.....	3.8	1.6	19.7	8.3	46.5	50.3	69.1	14.8
Philadelphia.....	3.7	8.5	38.8	22.6	65.9	59.2	99.1	13.8
Oklahoma City.....	2.9	2.0	29.3	7.2	52.4	67.9	70.3	17.2
Providence.....	2.9	6.9	24.9	15.1	39.5	36.0	96.2	4.3
Fort Worth.....	2.9	...	26.1	6.7	50.6	62.3	55.8	17.2
Baltimore.....	2.9	7.5	55.4	13.9	52.0	60.2	87.7	11.3
Toledo.....	2.8	-2.8	26.1	16.8	37.7	48.5	94.4	8.3
Akron.....	2.7	7.6	23.1	11.9	30.8	33.2	77.6	4.7
Indianapolis.....	2.5	2.6	20.1	5.6	37.1	50.6	83.7	12.3
Cleveland.....	2.4	-6.6	25.7	8.3	28.5	20.2	96.0	2.4
New Orleans.....	2.2	-5.3	31.4	11.4	45.8	31.3	97.2	8.3
Syracuse.....	2.1	7.8	25.7	13.6	46.3	31.6	68.3	3.8
Columbus, Ohio.....	2.1	2.1	25.5	10.1	38.7	57.0	75.4	13.1
Kansas City.....	2.0	-2.9	30.0	13.0	60.7	78.8	89.7	32.9
Louisville.....	1.9	-1.2	33.4	8.8	47.7	66.0	84.7	21.4
Birmingham.....	1.8	-8.9	37.6	8.1	45.7	48.7	28.4	15.8
Richmond.....	1.7	4.6	42.9	11.4	61.9	62.6	87.2	15.3

Table 1-1: Selected Population and Housing Characteristics of Census Tracts  
Containing Skid Rows, 45 Cities of the United States, 1950.(continued)

City	Esti- mated number of home- less persons (000) (a)	Change in percent non- white (b)	Percent having 6 years or less of school	Percent unem- ployed	Percent earning less than \$1,500 in 1949	Percent of dwel- ling units sub- stan- dard	Percent of dwel- ling units built before 1920	Percent of dwelling units with 1.51 or more persons per room
Tacoma.....	1.5	...	19.7	15.9	45.8	66.0	76.8	6.3
Norfolk.....	1.5	...	49.0	14.0	54.5	58.7	92.3	14.8
Chattanooga.....	1.2	...	54.3	8.3	56.7	77.6	72.6	19.9
San Jose.....	0.8	...	26.2	16.5	43.4	16.5	73.9	3.4
Nashville.....	0.8	0.5	31.3	4.4	56.9	80.7	95.0	20.2
Rochester.....	0.8	2.9	25.0	20.6	64.2	53.3	100.0	4.9
St. Paul.....	0.7	-0.1	28.1	14.5	44.4	51.3	99.3	10.7
Dallas.....	0.5	6.3	34.3	7.4	49.6	75.0	84.5	24.6

- (a) Includes all civilian persons of both sexes living outside regular households but not in institutions, irrespective of income.
- (b) Represents the change in percent nonwhite, 1940-50, for Central City subtracted from the change in percent nonwhite, 1940-50, of Skid Row tracts.

highly approximate. As estimates of homeless men who live in Skid Row areas they are deficient because (a) the census tracts encompass much more territory than the exact Skid Row areas, (b) women lodgers as well as male lodgers living in this surrounding area are counted in the estimates, and (c) hotel dwellers who live in better quality quarters and pay higher rates than do residents of Skid Row are also counted. As an extreme example, consider Washington, D. C., or Chicago. Here, the census tracts containing the Skid Row neighborhoods also include some of the best of the downtown hotels. The persons enumerated by the Census as permanent residents of these hotels are included in the estimate of homeless persons in tracts containing Skid Rows.

For a few cities for which direct estimates of Skid Row population are available, it appears that for all cities combined, the number of Skid Row homeless men is roughly one-half the total number of homeless persons reported for tracts containing Skid Rows. If this is used as a guide, the estimated number of homeless men in the Skid Rows of the 45 cities in 1950 would be about 100,000.

Table 1-1 lists the 45 cities in descending order according to the estimated number of homeless persons in their Skid Row census tracts. For each city, the number of homeless men is smaller than the estimate reported, and in most cases is considerably smaller.

The cities containing the major Skid Rows appear to be Chicago, San Francisco, Los Angeles, Detroit, and New York City. In each of these cities, the number of homeless men probably exceeds 5,000 or 6,000.

Perhaps the really impressive aspect of Table 1-1 is the large number of cities that has a medium-size Skid Row, probably between 1,000 to 3,000 homeless men. And the list of cities with Skid Rows certainly does not appear to be complete. Some of the nonresponse to the queries made to learn about the existence of Skid Rows, appears to be due to failure to report rather than lack of a Skid Row. Although a Skid Row is reported for each of the 22 largest standard metropolitan areas, these types of neighborhood are not reported for several medium-size cities that, on the basis of general familiarity, would seem to be possessors of Skid Rows. For examples, if a city such as Rochester, New York, reports the existence of a small but nevertheless identifiable Skid Row, it seems plausible that Atlanta, San Antonio, San Diego, Youngstown, Albany, and Wilkes Barre (for which no reports were received) would each also have such an area.

The smallest size S.M.A. for which a Skid Row was reported (Chattanooga) had a population of about 246,000 in 1950, and ranked 78th in size. Perhaps it would not be too inaccurate to conclude that almost all (if not every one) of the 100 largest cities (those with populations of 175,000 or more inhabitants), contain an identifiable Skid Row having at least 500 or more homeless men.

The concentration of men seems to be greater at major port cities, major railroad centers, and manufacturing or mining towns that require much manual labor, and near regions where migratory laborers help to harvest the crops.

Sex composition. As would be expected, most census tracts containing Skid Rows exhibit a preponderance of males. The average sex ratio (ratio of males to females) for such tracts in all 45 cities was 172 in 1950, while the corresponding ratio for the city was only 94. A rise in the sex ratio between

1940 and 1950 should indicate either that a Skid Row is growing in size (perhaps by displacing other population) or that the neighboring population is moving out. Between 1940 and 1950 the Skid Row areas of the following cities experienced a large increase in their sex ratio:

Dallas	Portland	Minneapolis
Houston	Richmond	
Nashville	Seattle	

Whether this is due to the emergence of larger and new Skid Rows or to the demolition or clearance of family-occupied slums in the environs cannot be determined.

Conversely, a sharp decline in the sex ratio from one census to another should indicate that the size of the Skid Row neighborhood is declining or that they are being invaded by families. Sex ratios declined sharply between 1940 and 1950 in the following cities:

Chicago	St. Louis	St. Paul
Kansas City	San Francisco	Rochester
Los Angeles	Buffalo	
Philadelphia		

From information concerning race composition, presented below, it appears that these cities were being invaded by Negro in-migrant families, and the falling sex ratios were due primarily to this factor, although there may also have been a shrinking of the Skid Row area, which had become quite populous during the depression years.

Race and nativity composition. The census tracts in which Skid Rows lie had above-average proportions of foreign-born population, in comparison with the city as a whole. Also they were being invaded by Negroes at a faster rate than the city. These facts may be observed from the following table:

<u>Race and nativity composition</u>	<u>Average of Skid Row tracts</u>	<u>Average of statistics for cities</u>
Percent foreign born, 1950 . . .	10.1	7.9
" " " , 1940 . . .	<u>15.6</u>	<u>11.2</u>
Change, 1940-50. . . . .	-5.1	-2.7
Percent nonwhite, 1950 . . . .	22.1	13.7
" " , 1940 . . . .	<u>16.3</u>	<u>11.4</u>
Change, 1940-50. . . . .	5.7	2.7

The Skid Row neighborhoods appear to have developed and thrived in census tracts that contained large numbers of foreign born population. This is evident from the high proportion of foreign born for 1940. As this foreign born population dies out (because of restrictions upon immigration) it is being replaced by Negroes and (in some cities) by Puerto Ricans.

As an examination of Table 1-1 will show, not all Skid Row neighborhoods were being invaded as fast as the rest of the city. In some cities (especially in the South) the balance of the city underwent a greater change in color composition than Skid Row areas. It was in the large industrial cities of the Northeast and the major cities of the Pacific Coast that the invasion was taking place.

Age composition. In comparison with the city, the Skid Row tracts had concentrations of older persons, with a deficit of children and young adults, and this difference increased between 1940 and 1950. This may be observed from the table of Appendix B, where it may be seen that the proportion of persons 65 and over is about 35 percent greater in the Skid Row census tracts than in the city as a whole. About one person in nine in the average Skid Row tracts was aged 65 and over, whereas in the average cities the ratio was one in twelve.

Socio-economic differences. In comparison with the city, Skid Row tracts have larger proportions of (a) poorly educated, (b) low income, (c) unemployed persons or (d) persons employed as laborers than the cities that contain them. The following statistics for average census tracts containing Skid Rows and for average cities containing a Skid Row illustrate these facts:

<u>Socio-economic item, 1950</u>	<u>Average Census tracts containing Skid Row</u>	<u>Average city</u>
Percent having 6 years or less of schooling . . . . .	30.3	17.3
Percent of labor force unemployed . . . . .	14.7	5.7
Percent in laborer occupations . . . . .	12.7	6.3
Percent earning less than \$1,500 in 1949 . . . . .	48.7	26.9

From the very large size of these differences there can be little question that not only are the homeless men of Skid Row themselves much poorer, less well educated, more concentrated in unskilled jobs, and beset by unemployment than most other neighborhoods in the city, but these conditions are prevalent in the other parts of the census tracts surrounding Skid Row.

Housing conditions. As has been indicated, in the Skid Row census tracts, a high proportion of persons do not live in private households, but in hotels and rooming houses. Among the population that do occupy private dwelling units, a very high proportion are renters rather than owners. A preponderant share of the private dwelling units themselves are substandard (in a dilapidated structure and without a private bath), located in old structures, and occupied at extraordinarily high densities. Also, vacancy rates are higher here than elsewhere in the city. The following housing statistics illustrate these facts.

<u>Housing item</u>	<u>Average of census tracts containing Skid Rows</u>	<u>Average city</u>
Percent living outside private households . . . . .	35.3	5.3
Percent of dwelling units owner occupied . . . . .	12.1	45.9
Percent of dwelling units vacant . . . . .	2.4	1.6
Percent of dwelling units substandard . . . . .	54.2	19.2
Percent of dwelling units with 1.51 or more persons per room . . . . .	13.0	4.7
Percent of structures built before 1920 . . . . .	83.8	50.9

It is important to realize that the above statistics do not refer to the residences of homeless men, except as these men are lodgers in private households, for hotels are excluded from the Census of housing. These data demonstrate that a large percentage of families living in areas immediately surrounding Skid Rows occupy old, substandard, and overcrowded quarters. The typical Skid Row is situated in a slum district, frequently where residences are intermingled with factories, warehouses, freight yards, and other nonresidential land uses.

Population Growth. Between 1940 and 1950 the tracts containing Skid Rows increased by an average of only 2.9 percent, while the city as a whole grew by 15.0 percent. This indicates that the population of most Skid Row areas was not growing. However, since the Skid Row is only a part of these tracts it can only be claimed as being probably true that the size of the Skid Row did not either grow or decline very much in this decade.

It is known that during the economic depression, 1930-38, the Skid Row areas became a haven for many unemployed men, and that during these years the Skid Row population reached unprecedentedly large numbers. But the rise in employment in the late 1930's caused much of this to be absorbed. Whether the process was completed by the time of the 1940 census is questionable. Other things being equal, one would have expected a decline in Skid Row population between 1940 and 1950, just because of the completion of the absorption of the unemployed stranded by the depression. On the other hand, the fact that these areas did not grow very much between 1940 and 1950 when the national population was growing 14 percent, suggests that Skid Rows may be declining somewhat as a percentage of the total population.



## CENSUS MATERIALS FOR CHICAGO'S SKID ROW

In order to take a closer look at the population characteristics of Skid Row homeless men, the U. S. Bureau of the Census was asked to retabulate its records for cubicle hotels and rooming houses for men in Chicago's Skid Row areas. A 20 percent sample of 9,095 persons living in these places in 1950 was tabulated. These data were then compared with the same items of information for the city of Chicago as a whole. Table 1-2 summarizes the results, and shows the outstanding differences between Chicago City and Chicago's Skid Rows.

In comparison with the adult population of the city of Chicago as a whole, an unusually high proportion of Skid Row men are:

- a. Foreign born or "other" nonwhite race (American Indian)
- b. Single, Widowed, or divorced (half have never married)
- c. Concentrated in the ages 45-74
- d. Very poorly educated, with more than 1/5 being "functionally illiterate" (having completed less than 5 years of elementary school)
- e. Unemployed, or not in the labor force at all. The unemployment rate among the Skid Row men was more than 8 times that of the general population.
- f. Not in the labor force, with "unable to work" as a primary reason
- g. Employed as wage or salary workers
- h. Of extremely low income, with almost one-half living on less than \$90 per month. Almost one-fourth of the men had received less than \$500 in cash during the preceding year.
- i. Irregular in employment--working only part of the year. Whereas only 11 percent of Chicago men worked 6 months or less, 31 percent of Chicago Skid Row men worked this little, and 15 percent worked only 3 months of the 12.
- j. Above average mobility, but with a surprising degree of immobility. It is generally thought that these men are extremely mobile, and continuously moving from one hotel to another, if not from one city to another. The census data show that more than two-thirds were enumerated in the same hotel or rooming house as they had lived a year earlier, and only 8 percent had moved in from another county.

Table 1-2: Characteristics of Chicago's Skid Row Population in Comparison with the Characteristics of the City of Chicago's Population 1950

Characteristics	Percent Distribution		Difference from City
	Skid Row	City	
<u>Population, Total</u> .....	<u>100.0</u>	<u>100.0</u>	...
Male.....	96.3	49.1	47.2
Female.....	3.7	50.9	-47.2
<u>Race and Nativity, Total</u> .....	<u>100.0</u>	<u>100.0</u>	...
<u>White, Total</u> .....	<u>96.4</u>	<u>86.2</u>	10.2
Native born.....	72.7	70.9	1.8
Foregign born.....	23.7	15.3	8.4
Nonwhite, total.....	3.6	13.7	-10.1
Negro.....	1.4	13.2	-11.8
Other.....	2.1	0.6	1.5
<u>Marital Status, Total</u> .....	<u>100.0</u>	<u>100.0</u>	...
Single.....	51.3	26.3	25.0
Married.....	14.6	64.1	-49.5
Separated.....	9.4	2.4	7.0
Divorced.....	10.5	2.5	8.0
Widowed.....	14.2	4.7	9.5
<u>Age, Total</u> .....	<u>100.0</u>	<u>100.0</u>	...
Under 20 years.....	1.5	1.5	...
20-24.....	3.6	10.0	-6.4
25-29.....	3.8	12.0	-8.2
30-34.....	5.1	11.5	-6.4
35-39.....	6.0	11.2	-5.2
40-44.....	8.5	10.2	-1.7
45-49.....	13.5	9.6	3.9
50-54.....	13.7	9.1	4.6
55-59.....	13.2	8.2	5.0
60-64.....	12.9	6.8	6.1
65-69.....	9.5	4.7	4.8
70-74.....	5.4	2.7	2.7
75 and over.....	3.1	2.4	0.7
<u>Years of School Completed, Total*</u> ....	<u>100.0</u>	<u>100.0</u>	...
None.....	6.0	2.4	3.6
Elementary 1-4.....	15.1	7.5	7.6
" 5-6.....	14.2	7.4	6.8
" 7.....	8.3	5.2	3.1
" 8.....	25.4	24.0	1.4
High School 1-3.....	15.0	17.7	-2.7
" 4.....	10.5	19.8	-9.3
College 1-3.....	4.2	8.3	-4.1
" 4.....	1.4	7.6	-6.2
<u>Employment Status, Total*</u>	<u>100.0</u>	<u>100.0</u>	...
<u>In the Labor Force 14 and over</u> ....	<u>72.8</u>	<u>61.8</u>	-9.0
Employed.....	47.2	78.4	-31.2
Unemployed.....	25.6	3.5	22.1
Not in the Labor Force.....	27.1	18.2	8.9
Unable to work.....	15.9	3.7	12.2
Other.....	11.2	14.5	-3.3

Table 1-2: Characteristics of Chicago's Skid Row Population in Comparison with the Characteristics of the City of Chicago's Population 1950  
(continued)

Characteristics	Percent Distribution		Difference from City
	Skid Row	City	
<u>Class of Worker (emp. persons), Total</u>	<u>100.0</u>	<u>100.0</u>	<u>...</u>
Private wage and salary workers.....	97.3	81.9	15.4
Government workers.....	0.9	7.4	-6.5
Self-employed workers.....	1.8	10.6	-8.8
Unpaid family workers.....	0.0	0.1	-0.1
<u>Unemployment Rate.....</u>	<u>35.2</u>	<u>4.2</u>	<u>31.0</u>
<u>Income, Total*.....</u>	<u>100.0</u>	<u>100.0</u>	<u>...</u>
Less than \$500.....	23.7	15.0	8.7
\$500-\$999.....	23.0	5.3	17.7
\$1000-\$1499.....	13.1	5.0	8.1
\$1500-\$1999.....	12.6	5.6	7.0
\$2000-\$2499.....	12.3	9.6	2.7
\$2500-\$2999.....	7.1	11.1	-4.0
\$3000-\$3499.....	4.3	14.6	-10.3
\$3500-\$3999.....	2.1	9.9	-7.8
\$4000-\$4499.....	0.5	7.4	-6.9
\$4500-\$4999.....	0.5	4.1	-3.6
\$5000-\$5999.....	0.6	5.7	-5.1
\$6000-and over.....	0.1	6.8	-6.7
<u>Weeks Worked Last Year, Total*.....</u>	<u>100.0</u>	<u>100.0</u>	<u>...</u>
Did not work in 1949.....	2.0	3.4	-1.4
1-13 weeks.....	12.8	2.4	10.4
14-26 weeks.....	16.5	4.9	11.6
27-39 weeks.....	17.0	5.6	11.4
40-49 weeks.....	16.6	14.0	2.6
50-52 weeks.....	35.1	69.7	-34.6
<u>Mobility, Total*.....</u>	<u>100.0</u>	<u>100.0</u>	<u>...</u>
Nonmobile-same house as '49.....	68.2	87.1	-18.9
Mobile-diff. house from '49.....	31.8	12.8	19.0
Diff. house-same county.....	24.0	10.2	13.8
Migrant-diff. county.....	7.8	2.6	5.2

\* Percent Distribution based upon the total no. of persons for whom information was reported.

## CONCLUSION

Almost every American city of 500,000 or more has a Skid Row neighborhood. Tendencies toward such a development are present in many cities having 175,000 to 500,000 inhabitants. Although there undoubtedly are differences from one Skid Row to another, with each one being unique in some ways, the general characteristics of most Skid Rows are the same: poor housing, occupied by low-income family-less men. Chicago appears to have one of the largest Skid Row developments in the nation. By making an intensive analysis of this phenomenon in this one city, it is expected that information will be obtained that will make it easier to understand Skid Rows in other cities.

## Chapter 2

### SOME CHARACTERISTICS OF RESIDENTS ON CHICAGO'S SKID ROWS

Even expert and long-time observers of Skid Rows in Chicago confess they cannot say reliably what kinds of men and how many of each kind live on Skid Row. The mission worker, the social worker, the tavern keeper, the policeman, the judge who sentences men arrested for drunkenness, or the labor contractor each sees only a biased fragment. If one walks along a Skid Row street in the daytime and notes the dozens of idle men loafing in small clusters, just drifting along the street, or leaning as solitary spectators against the buildings, he fails to see those who are at work. At night, a tour of the crowded taverns could give the impression that only heavy drinkers live here-- unless it is counterbalanced by information concerning those who are sober and asleep in their cubicles, who are watching TV, visiting friends, or playing cards in hotel lobbies, or who are attending mission services or meetings of Alcoholics Anonymous. The question, "How many of each kind?" is one that can be answered only by taking a sample census, that is, by interviewing a representative cross-section of the residents and getting for each one information which, when compiled, can yield a composite picture.

Such a sample survey was made on Chicago's Skid Rows between December 22, 1957 and April 1, 1958. A total of 614 men were interviewed by carefully selected, trained, and tested interviewers. Men to be interviewed were selected on the basis of strict probability sampling in accordance with a predetermined sampling plan that was designed to give results that would represent an unbiased cross-section of each of the four major Skid Row areas. The questions asked in the interview covered many aspects of the present situation and the life history of the men that were hypothesized as having a bearing on their now being on Skid Row. For example, the interview obtained facts of the following highly pertinent sorts: the family history of the individual and his present family status; his work history and present work status; his income status, his Social Security status; the condition of his health, both physical and mental; his social and other leisure-time activities; his residential arrangements; and other characteristics that might affect any efforts to improve his housing accommodations and environment.<sup>1</sup>

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<sup>1</sup>A copy of this interview schedule is contained in Appendix D. The reader is requested at least to peruse this appendix, because it will give him a better perspective from which to read the survey results. It should be reported here that the degree of cooperation and apparent honesty in answering questions surpassed all expectations. The residents of these areas responded with amazing frankness, both with respect to themselves and with respect to conditions of their lives. Inasmuch as these areas all have a very active "grapevine," news of the study traveled fast. The men correctly interpreted the purpose of the survey as being one of objective fact-finding in an effort to understand how they got to this place and what might be done to help them. The body of information assembled about this group is thought to be of very high and dependable quality, with a minimum of falsification and distortion.

Chicago's Skid Rows: Definition and Location. It is impossible to establish a definition of what constitutes a Skid Row community that will permit a clean-cut delineation of Skid Row areas. How, for example, does one differentiate between a slum and a Skid Row? Or between a rooming house area inhabited predominantly by workingmen and a Skid Row where many residents live in rooming houses? The definition used for the sample census of Skid Row residents was as follows: All residents of cubicle type hotels and all residents of missions which serve "homeless men" or low-income chronic alcoholics are to be included. All male lodgers in rooming houses and hotels with rooms where: (a) the rent per night is less than \$2.00 (or \$12.00 per week), (b) where men comprise more than 3/4 of the residents, and (c) where the neighborhood has the general Skid Row characteristics--with employment offices for unskilled labor, many taverns, barber colleges, cheap clothing stores, missions, and second-hand stores.

At least five areas in Chicago qualify under this definition (see map, p. vi):

- a. West Madison Street, from Canal to about 1200 West
- b. South State Street from the Lopp to 1100 South, with a single cubicle being located in the 3600 block on South State
- c. North Clark Street from the Loop to Chicago Avenue
- d. An "L" shaped area along South Clark Street from the Loop to 600 South and along Van Buren Street between State and Clark
- e. A small area near Wilson and Broadway, with a single cubicle hotel and a hotel with rooms catering exclusively to men.

Newer Skid Row type developments are emerging along 63rd Street, along Halsted Street extending South from Madison, and along Madison Street west of the 1200 block. They were not included in this survey because, in every case, they are intermingled inextricably with a slum-family situation.

Number of Homeless Men in Skid Row Areas. A careful estimate was made of the "homeless man" population of these Skid Row Areas. This was done as the first step of the sampling procedure. Each of the hotels and rooming houses, missions, and other places in which these men live was canvassed and a record made of the number of sleeping spaces (beds) they have available for these men to occupy and an estimate of the occupancy and vacancy at the time of the canvas (winter, 1957-58). The homeless man population was obtained simply by adding the occupancy figures for each of the places. Because at any one time many of these men are in the House of Correction or in Cook County Hospital, a canvas was made of each of these institutions, similar to that for lodging places. Finally, from discussions with persons familiar with the area, an estimate was made of the number of men who sleep in boxcars, under bridges, and in doorways, or who "carry the banner" (walk the streets or lounge in restaurants and railway stations because they have no place to sleep).

The canvass yielded the following results:

	Number of men	Percent of total
Total homeless men of Skid Rows in Chicago.	11,926	100.0
West Madison Street Area . . . . .	7,525	63.1
South State Street Area . . . . .	1,687	14.1
South Clark and Van Buren Street Area . . . . .	1,223	10.3
North Clark Street Area . . . . .	691	5.8
Other areas . . . . .	370	3.1
Jails, Hospital, sleeping out . . . . .	430	3.6

As will be explained below, this count is an understatement of the number of men, because smaller rooming houses were not canvassed in the North Clark Street and in the "other" areas. The correct number of homeless men living in Chicago under Skid Row conditions probably is between 12,500 and 13,000.

Where Homeless Men Live. More than two-thirds (67 percent) of the homeless men residents of Skid Row were found in cubicle-type hotels (see Table 2-1 and 2-2). Hotels with single rooms provided accommodations for an additional 14 percent, while rooming houses housed 7 percent. Missions were providing shelter for about one man in twelve (8 percent). About  $3\frac{1}{2}$  percent were estimated to be in the Cook County Hospital, in the city jail, or sleeping out.

The cubicle type hotels were divided into three classes:

- Large--those with 300 cubicles or more
- Medium-size--those with 200 to 300 cubicles
- Small--those with fewer than 200 cubicles.

The large cubicle-type hotels are by far the major source of residence. There are 13 such hotels in Chicago. Although they are less than 20 percent of the 70 men's hotels canvassed, they house almost 40 percent of the men. Medium-size cubicle hotels, small-size cubicle hotels, and hotels with room each are of about equal importance for housing (13-15 percent of the total), but all three combined are only about as large as the large cubicle hotels.

It must be emphasized that this survey focused primarily upon hotel dwellers, and made a systematic effort to encompass every rooming house only in the West Madison and South State Street areas. For this reason, an unknown number of lodgers in private homes were omitted. From the results obtained on the canvass of rooming houses on West Madison Street it could be inferred that perhaps as many as 600 to 1000 homeless men live in rooming houses elsewhere in the city under Skid Row conditions.

Table 2-1: Estimated Number of Residents on Chicago's Skid Rows, Winter 1958, by Type of Residence.

Type of residence	Total all areas	West Madison Street	South State Street	North Clark Street	South Clark & Van Buren	Others
Total Skid Row residents...	11,926	7,525	1,687	691	1,223	370
Living in cubicle hotels.....	8,038	5,175	1,246	204	1,223	190
Large (300 or more).....	4,624	3,664	940	...	500	...
Medium-size (200-300).....	1,779	758	...	204	577	...
Small (less than 200).....	1,635	753	306	...	146	190
Living in hotels with rooms..	1,677	1,038	152	487	...	(a)
Living in rooming houses.....	806	702	59	(a)	...	(b) 45
Living in missions.....	975	610	230	...	...	135
In Cook County Hospital. (c)...	150	...	...	...	...	...
In House of Correction. (c)...	170	...	...	...	...	...
Sleeping out..... (c)...	110	...	...	...	...	...

(a) Not covered by this survey.

(b) Covers only one outlying Skid Row area.

(c) Not distributed by area

Table 2-2: Percent Distribution of Residents on Chicago's Skid Rows, by Type of Residence, Winter 1958.

Type of residence	Total all areas	West Madison Street	South State Street	North Clark Street	South Clark & Van Buren	Others
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
Living in cubicle hotels.....	67.4	68.8	73.9	29.5	100.0	51.4
Large (300 or more).....	38.8	48.7	55.7	...	40.9	...
Medium-size (200-300).....	14.9	10.1	...	29.5	47.2	...
Small (less than 200).....	13.7	10.0	18.1	...	11.9	51.4
Living in hotels with rooms..	14.1	13.8	9.0	70.5	...	(a)
Living in rooming houses.....	6.8	9.3	3.5	(a)	...	(b) 12.1
Living in missions.....	8.2	8.1	13.6	...	...	36.5
In Cook County Hospital. (c)...	1.3	...	...	...	...	...
In House of Correction. (c)...	1.4	...	...	...	...	...
Sleeping out..... (c)...	0.9	...	...	...	...	...

(a) Not covered by this survey.

(b) Covers only one outlying Skid Row area.

(c) Not distributed by area.



Age. Skid Row residents are considerably older, on an average, than adults in other parts of Chicago, or in comparison with adults in the general population. But they are not predominantly men of retirement age; an extraordinarily large proportion of them are middle-aged men in their forties and fifties. Table 2-3, which points out the differences between the age composition of residents of Chicago's Skid Row and the population of the entire United States in February of 1958 and of Chicago in 1950, indicates that on Skid Row there is a large deficit of men under 40 years of age, with an excess of men at all ages over 40. This excess is heavily concentrated in the age groups 45-59.

Since 1950, the age composition of Skid Row appears to have changed in the direction of having more younger and fewer older men. A retabulation of 1950 census data for a sample of Skid Row hotels shows that in 1950 there was a much heavier concentration of men at the ages 55 and over than at the present time. Conversely, since 1950, men 35 to 49 have tended to comprise a larger share of the total. This change may be a direct result of the increasing effects of Social Security upon the incomes of older low-income workers. When they retire now, a larger proportion of these men have full coverage, and can afford to move elsewhere to spend their declining years. It may also indicate, as some fear, that chronic alcoholism is on the increase among younger men. There seems to have been a decrease since 1950 in the proportion of very young men under 30 years of age. (However, several observers have noted a trend toward a return of younger men since the Korean war.)

South State Street's Skid Row has a younger age composition than the other Skid Rows in Chicago. This is due in part to race composition; the Negro Skid Row lies at the southern end of the State Street area. North Clark Street, in contrast, has a high concentration of older men, with younger men being only about one-half the proportion they are on West Madison Street. On South Clark and Van Buren Streets, the men are concentrated in the working ages between 35 and 64. The bases for these and other differences to be noted between the various Skid Row areas will be discussed at the conclusion of this chapter.

Racial Composition. Chicago's Skid Rows are, with one exception, almost entirely white (see Table 2-5). Excluding the South State Skid Row, less than seven per cent of the homeless-man population is either Negro or Indian. Among the white residents, anti-Negro feelings tend to be quite intense, and hotels tend to be either all-Negro or all-white. The only mixed Negro-white sleeping accommodations are those of the missions, and even here the management tries to restrict the proportion of Negroes.

The South State Skid Row includes three cubicle-type hotels that cater exclusively to Negroes, boosting the non-white proportion in this area to 39 per cent. The evidence indicates that the Negro Skid Row is merely an adjunct of the Negro slum, and is of quite different character from the white Skid Row, but because of the small size of the group in our sample, detailed analytical study of this group was deemed to be inadvisable because any found differences might very well have been attributable to sampling variance.

A small minority of Skid Row residents are American Indians (estimated at two per cent). Although large numbers of Indian families are found in the North Clark vicinity, very few homeless Indians may be found in this area. Just as in the case of the Negroes, because of the small number of Indians caught in our sample, it is almost impossible to make any detailed statement concerning their situation with respect to the Skid Row population at large.

A rather large and long-established colony of Mexicans is situated just south of West Madison Street, along Halsted Street. Puerto Ricans have been settling on both South State and North Clark, as well as near the Mexican colony. But these Spanish-speaking residents tend to live in family groups. Although they live under slum conditions in very poor circumstances, they are not "homeless" and hence are excluded from this study. Only occasionally are Mexican or Puerto Rican men found living in cubicle-type hotels. Very few of the hotels

Table 2-3: Age Composition of Chicago Skid Row Residents in 1958 and 1950, in Comparison with the U. S. population and the City of Chicago.

Age	United States, Feb 1958(a)	Chicago NORC Survey, 1957-58	Skid Row Special Census Tab 1950(b)	City of Chicago 1950	Difference-- Skid Row vs. U.S., 1958	Change in Skid Row 1950-58
Total, 20 yrs. & over...	100.0	100.0	100.0	100.0	....	....
20-24 years.....	10.4	1.0	3.7	10.2	-9.4	-2.7
25-29 " .....	10.8	3.3	3.9	12.2	-7.5	-0.6
30-34 " .....	11.4	6.0	5.2	11.7	-5.4	0.8
35-39 " .....	11.4	11.1	6.1	11.4	-0.3	5.0
40-44 " .....	10.6	12.4	8.6	10.4	1.8	3.8
45-49 " .....	10.0	16.3	13.7	9.7	6.3	2.6
50-54 " .....	8.7	13.3	13.9	9.2	4.6	-0.6
55-59 " .....	7.5	11.1	13.4	8.3	3.6	-2.3
60-64 " .....	6.4	8.4	13.1	6.9	2.0	-4.7
65-69 " .....	5.0	9.0	9.6	4.8	4.0	-0.6
70-74 " .....	7.8	5.2	5.5	2.7	0.3	-0.3
75 years and over.....		2.9	3.1	2.4		-0.2

Sources:

(a) U. S. Bureau of the Census, Current Population Reports, Series P-57, No. 188, Feb 1958.

(b) Special retabulation of 1950 census schedules of returns for a 20 percent sample of persons enumerated in cubicle type hotels and low-price rooming houses in the Skid Row areas.

Table 2-4: Age Composition of Residents of Four Skid Row Areas in Chicago, 1958.

Age	All Skid Rows in Chicago	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and Others
Total.....	100.0	100.0	100.0	100.0	100.0
20-34 years.....	10.3	10.1	14.8	6.0	7.6
35-44 years.....	23.6	25.1	21.4	9.0	25.2
45-54 years.....	29.5	28.8	36.6	33.0	19.9
55-64 years.....	19.5	18.0	13.2	32.0	35.9
65 years and over	17.1	18.1	13.9	20.0	11.5

will admit them. Because they were suspicious of the survey (as they are of any official-seeming inquiry), the refusal rate among the few Spanish-speaking persons that fell in the sample was very high.

The central and western sections of the West Madison Street Skid Row are surrounded by slums which are now occupied by Negro families. This encirclement by Mexicans, Puerto Ricans, and Negroes is bringing a steadily greater frequency of contact between the races in all Skid Row areas. In restaurants, movies, and in public facilities such as the Reading Room, the missions, and the public welfare agencies there is much more interracial contact now than in the past. Also, the white residents of Skid Row must compete for jobs with workers from these races, and often work side by side with them.

There seem to be fewer restrictions against admitting American Indians to the hotels than against other minority groups.

To summarize: The Skid Rows tend to be Caucasian islands in a sea of Negroes, Puerto Ricans, and Mexicans that have settled in the oldest and most deteriorated slum areas around the central business district. Despite feelings of antagonism toward these groups held by white residents, Skid Row facilities now are operated on an interracial basis more than ever before.<sup>1</sup>

Employment status. During the week preceding the date they were interviewed, 40 percent of the Skid Row residents did gainful work for as much as a part of one day or more. The other 60 percent of the men did not do any income-yielding work during the preceding week. The reasons given for not working are reported in the lower section of Table 2-6. Of those who did not work, 46 percent reported that they were unable to work either because of age or permanent disability (36 percent) or because of temporary illness (10 percent). Unemployment was very high; 39 percent reported that they had applied for work, but had been unable to obtain a job. Winter is the slack season for common labor, both in Chicago and on jobs out of the city that hire men through Chicago employment offices. The interviewing was heavily concentrated in January and February, which the men regard as the part of the year when their financial troubles are at their worst. Fifteen percent of the men who were without work were classified as "did not care to work". (In coding these materials, a fairly strict practice was followed of coding as "did not care to work" anyone who did not give illness or other unavoidable circumstances as a reason for not actively seeking work. For example, those who were drawing unemployment compensation and who were not ill but did not look for a job

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<sup>1</sup>The considerable number of Negroes walking the streets and using the Reading Room, missions, and other facilities created especially for the homeless man caused the research staff initially to suspect that all of Chicago's Skid Rows were doomed to extinction at their present sites (with possible removal to other spots) simply through the process of invasion, which has been so commonplace in other types of areas where residential facilities are old and substandard. They suspected that job competition would eventually result in Negroes and Puerto Ricans taking over the jobs available to Skid Row residents, with the result that the economic basis for Skid Rows, as now constituted, would disappear, or pass to other racial groups. Our evidence lends little, if any, support to this view (see paragraphs on racial composition above).

Table 2-5: Race Composition of Residents of Four Skid Row Areas in Chicago, 1958.

Race	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and Others
Total.....	100.0	100.0	100.0	100.0	100.0
White.....	88.9	93.4	60.7	100.0 <sup>(a)</sup>	93.9
Negro.....	9.2	4.6	38.5	... <sup>(a)</sup>	1.5
Indian.....	1.9	1.9	0.8	...	4.6

(a) Less than 0.05 percent.

Table 2-6: Employment Status and Reasons for Not Working.

Employment status and reasons for not working	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
<u>Employment status</u>					
Total.....	100.0	100.0	100.0	100.0	100.0
Employed during pre- ceding weeks.....	39.7	37.1	42.0	42.0	42.7
Not employed.....	60.3	62.9	58.0	58.0	57.3
<u>Reasons for not working</u>					
Total not working...	100.0	100.0	100.0	100.0	100.0
Too old or disabled..	35.9	32.7	37.0	63.8	48.2
Temporary illness....	9.9	9.8	9.6	...	21.4
Applied for work.....	39.4	41.9	41.1	20.7	21.4
Did not care to work.	14.8	15.6	12.3	15.5	8.9
Was on a spree.....	4.3	5.5	...	...	3.6
Other.....	10.5	10.1	12.3	15.5	5.4

Note: No information concerning receipt of pension or public aid was obtained from 0.9 per cent of the respondents. The above cases are based upon cases for which information was obtained.

were classed as "did not care to work".) <sup>1/</sup> About one-third of these (4 percent of all nonworkers) said they did not seek work because of a drinking spree.

Conditions during the winter of 1957-58 were unusually severe because of the business recession which began in late summer and became very acute in mid-winter. Skid Row workers are among the first to be laid off or otherwise to be affected by a downturn in business conditions.

The picture one gets of the employment situation on Skid Row in midwinter is that there are 3 major classes of men, each about equal in size:

- Men with jobs,
- Men looking for work,
- Men too old or too disabled to work.

This is supplemented by a fourth group, roughly 15 percent of the total, of men who do not care to work, either because they are drawing a temporary unemployment compensation, because they are on a spree drinking up wages earned previously, or for other reasons.

Table 2-6 indicates that the Skid Rows of North Clark Street and of South Clark and Van Buren Streets contain extraordinarily high proportions of persons unable to work. A lower proportion of the men from West Madison Street were at work than on the other Skid Rows. Active unemployment was twice as intense along West Madison and South State Streets as on the other two Skid Rows.

Pensioners on Skid Row. When surveyed, 47 percent of the men were drawing some form of pension or public assistance payments. The largest source of aid was Public Assistance ("relief"). It is estimated that about one man in five on Skid Row is on the relief rolls of the Cook County Department of Welfare. (Not all of these obtain all of their payment from Public Assistance, but are drawing a small Social Security or Railroad Retirement pension which was being supplemented by Public Assistance.) It has been observed in several different cities that inflation has driven many low-income people without families to live on Skid Row, and Chicago appears to be no exception. Many of the older men who are reaching retirement age at the present time have managed to acquire only the minimum amount of Social Security coverage, which provides only \$30.00 per month upon retirement. Where the retirement allotment is insufficient to cover the minimum expenses of living, even on Skid Row, Public Assistance funds are used to provide this minimum to those citizens of Illinois who meet residence requirements and have no other source of help. Many of the men have worked in industries that were not "covered" and hence have no Social Security insurance rights; when old age or ill health arrives and with no family to care for them, they seek public assistance.

About 10 percent of the residents are drawing Social Security benefits. (Almost 60 percent of these have the combination of Social Security and Public Assistance described above.) Approximately one-ninth of the men were drawing unemployment compensation in some form. Much of this is the "rocking chair pay" (railroad unemployment compensation) that they had accumulated during the summer months as gandy dancers.

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<sup>1/</sup> The law requires persons drawing unemployment compensation to report once each week to the State Employment Service.

Table 2-7: Receipt of Pension or Public Aid

Pension or Aid received	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Receives no pension or aid..	53.1	53.5	51.0	55.2	52.3
Receives pension or aid.....	46.9	46.4	49.0	44.8	47.7
Social Security pension...	10.3	10.1	13.6	13.4	3.4
Old Age Assistance.....	2.2	2.3	...	4.5	3.4
Public Assistance.....	22.0	20.9	22.7	22.4	30.7
Unemployment Compensation.	11.9	12.5	14.1	9.0	3.4
Military Pension.....	5.5	6.7	1.5	4.5	3.4
Railroad Retirement pens..	1.7	1.7	1.5	...	3.4
<u>Combinations of Aid</u>					
Pub. Assist.--Social Security..	5.8	6.4	4.5	9.0	...
Pub. Assist.--Railroad.....	0.5	0.7	...	...	...
Railr. Ret.--Old Age Assist..	0.5	0.7	...	...	...

Note: No information concerning receipt of pension or public aid was obtained from 1.6 percent of the respondents. The above percentages are based upon cases for which information was obtained.

These statistics suggest most strongly that the local, state, and national programs for unemployment, indigence, and retirement assistance to nonfamily workers, are one of the economic mainstays of Skid Row. This information can become a strong lever in making future plans for the residents of these areas.

Income. The income distribution of the Skid Row residents may be viewed from two perspectives: comparison with the national average and comparison with minimum levels of living below which no citizen should be allowed to fall. From the first point of view, these men earn a very small income in comparison with other citizens. On the other hand, they hold some of the lowest paying jobs in the economy, and hence a low income distribution is to be expected. From this second point of view, it may be surprising that as many of the men are able to be completely self-supporting as is the case.

In 1957, the median money income of the average U. S. male 14 years of age or older was \$3,684 (among those who received any income at all). The estimated median total income of men on Skid Row was \$1,083. This comparison minimizes the difference between the Skid Row and the average man because the estimated value of food and lodging provided on disbursing orders to public assistance recipients is included as income of Skid Row residents. Table 2-8 reports the income distribution of the Skid Row residents in more detail. A disproportionately large share of the men are concentrated in the \$500 to \$1,000 bracket, and also in the \$1,000 to \$1,500 group. Whereas 37 percent of U. S. men earn \$4,500 or more, only about 3 percent of Skid Row men earn this much.

On the other hand, the income distribution of the Skid Row men has a more optimistic aspect. A man on Skid Row usually has no family to support and may spend all he earns for his own maintenance. If \$100 per month is accepted as the minimum income with which a man can feed and clothe himself and provide the necessities of life at a minimum desired level of comfort and enjoyment, then almost one-half of the residents of Skid Row have incomes with which to attain this minimum. About one-third of the men have incomes of \$1,500 or more, which permits them to live in comparative comfort, by Skid Row standards. Nevertheless, there is a dark side to the picture. If \$75.00 per month is regarded as the minimum income which a man must have in order to barely support himself, then about one-fourth of Skid Row residents, or roughly 3,000 persons, are in this plight, and about 1,600 persons are in the circumstances of earning less than 2/3 the minimum. Because most recipients of Old Age Assistance and General Public Assistance get \$65 or more per month, it appears that there is a sizable group of self-supporting men who earn less than the average relief client gets.

Residents of West Madison and South Clark and Van Buren Streets tend to receive a wide range of income--there are both extremely low and higher incomes in these areas. South State and North Clark Streets, in contrast, seem to have a greater concentration of income near the \$750-\$1,000 level.

Extent of Drinking. Each man was asked the question, "How heavy a drinker are you? Do you consider yourself to be a heavy drinker, a moderate drinker, a light drinker, a periodic drinker, or don't you drink at all?" In addition, several follow-up questions were asked concerning drinking habits. From this supplementary information, a considerable number of persons were arbitrarily re-classified as heavy drinkers, irrespective of the way they

Table 2-8: Income Distribution of Skid Row Residents in Comparison with U.S. Males.  
(Restricted to persons who received some income)

Income	1957 Males, United States	Total	West Madison Street	South State Street	North Clark Street	South Clark & Van Buren
Median income.....	\$3,684	\$1,083	\$1,137	\$ 935	\$1,065	\$1,097
<u>Percent distribution</u>						
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
Less than \$500.....	9.2	13.1	11.4	19.7	7.1	20.0
\$500 - \$750.....	8.1	11.5	13.2	5.3	7.1	11.2
\$750 - \$1,000.....		21.8	19.2	33.8	32.1	16.0
\$1,000 - \$1,250.....	6.5	10.8	11.3	9.2	14.3	7.2
\$1,250 - \$1,500.....		6.3	5.4	7.9	7.1	11.2
\$1,500 - \$2,000.....	5.2	10.2	10.7	7.0	14.3	9.6
\$2,000 - \$2,500.....	6.4	8.8	9.3	7.0	7.1	8.8
\$2,500 - \$3,500.....	12.1	10.6	12.3	4.8	7.1	4.0
\$3,500 - \$4,500.....	15.2	4.1	4.9	3.5	...	...
\$4,500 and over.....	37.2	2.9	2.1	1.8	3.6	12.0

Note: The above percentages are based upon cases for which information was obtained. No information concerning income was obtained from 9.6 percent of the skid Row respondents.



had reported themselves. Following is a best estimate of the extent of drinking among the Skid Row residents:

	<u>Number of homeless men*</u>	<u>Percent distribution</u>
Total.....	<u>11,925</u>	<u>100.0</u>
Non-drinkers. . . . .	1,825	15.3
Light drinkers. . . . .	3,025	25.4
Moderate drinkers . . . . .	1,975	16.6
Heavy drinkers. . . . .	5,100	42.8
Periodic drinkers . . . . .	<u>2,375</u>	<u>19.9</u>
Perennial heavy drinkers. . . . .	2,725	22.9
Self reported . . . . .	1,875	15.7
Assigned, basis other info. . . . .	850	7.1

\*The estimates have been rounded to the nearest 25 persons.

Table 2-9 provides information concerning the extent of drinking on each of the Skid Row areas, including the proportion of cases that were reassigned from a less to a heavier extent of drinking. An estimate of the number of nondrinkers and drinkers of each type in each of the Skid Row areas is as follows:

<u>Type of drinker</u>	<u>Total all Skid Row</u>	<u>West Madison Street</u>	<u>South State Street</u>	<u>North Clark Street</u>	<u>South Clark, Van Buren, and others</u>
Total homeless men	<u>11,925</u>	<u>7,925</u>	<u>1,700</u>	<u>700</u>	<u>1,600</u>
Nondrinkers. . . . .	1,825	1,100	275	175	275
Light drinkers . . . . .	3,025	1,950	400	225	450
Moderate drinkers. . . . .	1,975	1,250	375	125	225
Heavy drinkers . . . . .	5,100	3,625	650	175	650
Periodic . . . . .	<u>2,375</u>	<u>1,700</u>	<u>325</u>	<u>125</u>	<u>225</u>
Perennial. . . . .	2,725	1,925	325	50	425
Self reported. . . . .	1,875	1,400	225	...	250
Assigned . . . . .	850	525	100	50	175

Note: All estimates have been rounded to the nearest 25 persons.

The discovery that about 40 percent of the Skid Row residents are teetotalers or only light drinkers (both by their own classification and their reports of their drinking behavior) is consistent with the finding that a substantial number of persons live in Skid Row areas for reasons other than drinking-- such as the cheapness of living.

The periodic drinkers (about one-fifth of all drinkers) were classified as a subtype of heavy drinkers for two reasons. During the period of their drinking, periodic drinkers tend to be uncontrollably heavy drinkers. Also,

Table 2-9 : Extent of Drinking among Homeless Men on Chicago's Skid Rows, Winter, 1958

Extent of drinking as self reported and reassigned	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Never drinks.....	15.3	13.8	16.7	26.8	17.6
Light drinkers.....	27.1	26.6	26.3	30.9	29.8
Assigned, Heavy.....	1.8	1.8	2.4	...	2.3
Moderate drinkers.....	22.0	21.2	24.3	24.7	22.9
Assigned, Heavy.....	5.5	5.4	3.6	6.2	9.2
Heavy drinkers, total....	42.9	45.5	38.6	23.7	41.2
Periodic.....	20.1	20.9	19.9	17.5	14.5
Perennial.....	22.8	24.6	18.7	6.2	26.7
Self reported.....	15.6	17.5	12.7	...	15.3
Assigned.....	7.2	7.1	6.0	6.2	11.5

Note: These percentages are based upon the cases for which information was available. No information concerning extent of drinking was obtained from 2.9 percent of the men interviewed.

Table 2-10: Educational Attainment of Homeless Men on Chicago's Skid Row, Winter, 1958

Years of school completed	U.S. Males 1950	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
No education.....	2.7	2.9	3.4	3.2	...	...
<u>Grade School:</u>						
1-2 years.....	8.5	2.8	2.7	3.2	3.0	2.3
3-4 years.....		11.9	12.8	10.5	9.0	8.6
5-6 years.....		9.3	11.9	12.2	11.3	20.0
7 years.....	6.9	9.6	10.0	10.9	6.0	6.2
8 years.....	20.7	20.5	20.4	21.4	15.0	24.2
<u>High School:</u>						
1-3 years.....	17.7	21.2	17.8	27.0	35.0	30.5
4 years.....	20.7	13.3	5.2	5.6	6.0	17.2
<u>College:</u>						
1 year.....	7.4	1.9	1.9	1.2	3.0	2.3
2-3 years.....		2.8	2.6	3.2	3.0	3.9
4 years or more....		6.1	1.1	1.0	2.4	...

Note: The above percentages are based upon cases for which information was obtained. No information concerning educational attainment was obtained for 3.6 percent of the Skid Row respondents and 2.7 percent of the U.S. population.

several interviewers reported that they thought there was a tendency for some perennially heavy drinkers to report themselves as periodic drinkers because it made the confession seem a little less self-condemning.

From the above information it may be determined that West Madison Street has a higher proportion of heavy drinkers and a smaller proportion of teetotalers than any of the other Skid Row areas. This higher proportion, coupled with its greater total population, results in a very large proportion of heavy drinkers being concentrated on West Madison Street. Of an estimated 5100 homeless men on Skid Rows in Chicago who are heavy drinkers, 3626, or 71 percent are on West Madison Street. The estimated number of perennial heavy drinkers is about 2725. This represents what is probably a moderate underestimate of the "hard core" of the problem of chronic alcoholism on Skid Row areas.

Educational attainment. Residents of Skid Row have considerably less educational attainment than the general population (see Table 2-10). But it is to be expected that the average educational attainment of such a group of older men who are retired or employed primarily as operatives, service workers, and unskilled laborers would be lower than the average of the general adult population. A more revealing comparison is to note the differences between their educational attainment and that of men in the general population who hold similar occupations. For this purpose, a "composite" educational attainment for low-income workingmen was made by averaging the national statistics of educational attainment for male operatives, service workers, and nonfarm laborers. The differences between the educational attainment of the Skid Row men and this composite for men with similar occupations were very small:

<u>Educational attainment</u>	<u>U. S. Composite 1950</u>	<u>Skid Row men 1958</u>
Total . . . . .	100.0	100.0
No education . . . . .	3.2	2.9
Grade school, 1-4 years . . . . .	12.9	14.7
"    "    5-7 years . . . . .	22.4	21.5
"    "    8 years . . . . .	24.3	20.5
High school, 1-3 years . . . . .	18.7	21.2
"    "    4 years . . . . .	14.5	13.3
College, 1 to 3 years . . . . .	3.0	4.7
"    "    4 years or more . . . . .	1.0	1.1

On the one hand, a slightly greater proportion of Skid Row men failed to graduate from eighth grade than was true among the general operative-craft-laborer in the United States. But in comparison with this same group, a slightly larger percentage of Skid Row men had attended college. Actually, both sets of statistics are based upon small samples, and the differences between them could easily be due to chance variations.

Two important implications may be drawn from this information. First, contrary to a popular misconception, Skid Row is not populated with highly educated men who have landed here because of excessive drinking. Instances of

such events are not unknown, but they are quite rare rather than the average. (Nevertheless, the fact should not be overlooked that almost  $\frac{1}{5}$  of the Skid Row men report they had graduated from high school, which is educational preparation much more than adequate to prepare them for better jobs than they now hold. In other words, Skid Row is neither a collecting place for the semi-illiterates and uneducatable men of the nation, nor is it the "last stop" for alcoholic business and professional men. Its educational composition is "just about average" for the occupational composition of its residents.

Present occupation. What jobs do the employed men on Skid Row hold? In comparison with all employed men in Chicago, Skid Row residents are heavily concentrated toward the bottom of the socio-economic scale of occupations. For most of the men, work opportunities are confined to the lowest-paying, most irregular, and most disagreeable tasks available. These jobs tended to fall into the classes of work identified by the census as "service workers" and "laborers." Most of the service work for Skid Row men consists of restaurant jobs--as dishwashers, vegetable peelers, and other kitchen helpers--or as porters, janitors, and clean-up men in hotels or other business establishments. The laborers were distributed among several different industries, but were especially heavily concentrated in manufacturing (packers, clean-up men), transportation (gandy dancers, truck helpers, freight-car unloaders) and retail trade (stock room and warehouse labor). There are disproportionately few craftsmen and skilled workmen, semi-skilled factory operatives, and sales workers among the Skid Row men. It may appear surprising to find almost 12 percent of these men classed as "clerical workers." The men falling in this category are primarily bill peddlers for retail stores or advertising agencies or checkers and stock messengers in wholesale establishments and warehouses.

In the entire survey, no persons were found who were currently engaged in a professional capacity, and an infinitesimally small number of persons were employed as proprietors or managers. Occasionally the interviewers encountered skilled and semiskilled workmen holding excellent jobs and receiving good pay. Among these are truck drivers, cooks and waiters in restaurants, machinists and other factory operatives with good and steady jobs, compositors and type-setters, and mechanics.

Industry of employment. What kinds of companies hire the homeless men of Skid Row? The major sources of employment for these men are:

- Restaurants
- Large department stores
- Factories
- Warehouses
- Railroads, for track maintenance
- Trucking firms and freight handlers
- Advertising firms (for bill peddling)
- Garages and filling stations--car washers
- Hotels (especially on Skid Row)--janitors, porters
- Bowling alleys--pin setters
- Hospitals--kitchen, cleanup help
- Religious organizations operating industrial enterprises for rehabilitation
- "Spot" jobs requiring nonroutine cleaning, carrying, moving and other work involving little skill.

Table 2-12, which provides statistics concerning the major industry group in which the employers of Skid Row labor are classified by the census. From this table it may be seen that more than one-third are in the wholesale and retail

Table 2-11: Present Occupation of Employed Homeless Men on Chicago's Skid Rows, Winter, 1958

Major occupation group	Chicago 1950	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
Professional.....	8.5	...	...	...	...	...
Managers, officials and props., exc. farm....	11.0	0.9	0.7	...	7.1	...
Clerical and kindred workers.....	11.0	11.6	12.1	19.5	...	4.0
Sales workers.....	7.3	2.5	2.0	1.9	14.3	...
Craftmen, foremen and kindred workers.....	21.5	7.5	8.4	...	7.1	13.3
Operatives and kindred workers.....	23.0	10.3	11.9	10.3	...	6.7
Prvt. household workers	0.1	1.8	2.0	...	7.1	...
Service workers.....	9.4	37.3	35.2	31.5	50.0	50.7
Farm laborers.....	0.1	0.4	0.7	...	...	...
Laborers, except farm and mine.....	7.9	27.7	27.1	37.1	14.3	25.3

Note: No information concerning current occupation was obtained from 0.7 percent of the respondents. The census did not obtain this information for 0.9 percent of the Chicago residents. The above percentages are based upon cases for which the information was obtained.

Table 2-12: Industry in Which Homeless Men on Chicago's Skid Rows are Employed, Winter, 1958

Industry	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Agriculture.....	1.3	1.3	2.8	...	...
Construction.....	2.9	3.1	...	7.1	4.0
Manufacturing.....	11.5	13.2	...	14.3	16.0
Transportation and communication.....	10.6	11.5	10.2	7.1	8.0
Wholesale and retail trade.....	35.8	35.2	32.4	57.1	32.0
Eating and drinking places.....	20.3	21.1	13.9	28.6	20.0
Business services.....	10.5	10.4	22.2	...	...
Personal and recreation services.....	19.4	18.3	23.1	...	24.0
Professional and public administration.....	8.0	7.0	9.3	14.3	16.0

Note: The above percentages are based upon respondents from whom information was obtained. No information was obtained concerning the industry of employment of 0.7 percent of the men who had worked during the weeks preceding the interview.

industry, and that restaurant work is 20 percent of all employment. In this table, the construction and transportation industries are not under-rated as sources of employment, for these are at low ebb in midwinter when the men were interviewed.

Spot job workers. All of the Skid Rows are specialized in a unique kind of employment--the "spot job," or temporary day work. Employment agencies and labor contractors located here hire men by the day, and pay them each night when the job is over. They are able to deliver any desired number of unskilled workers to an employer to meet a temporary emergency or to handle peak work loads. Unloading freight cars and trucks, washing dishes in restaurants on weekends or when conventions are in town, peddlers of popcorn and candy bars at major public events are examples of such work. The employment office or labor contractor sends a single bill to the firm for whom the work is performed.

Almost one-half (45 percent) of all jobs on Skid Row held by men during the week preceding their interview were "spot jobs." Only about 55 percent of the men who worked had a steady job.

This willingness to accept temporary work when it is available, and to sit idle when work is not available, appears to be one of the important economic functions of Skid Row. It permits the industrialist and the businessman to meet emergencies with adequate manpower without having to retain men on the payroll when their services are not actually needed.

Wages per hour. Table 2-14 reports the wages per hour paid to the workers on Skid Row. Despite the Minimum Wage Law, 38 percent of the workers earn less than \$1.00 per hour, and there are significant numbers of men earning at rates that are unbelievably low for these times of inflation. For example, 5 percent of the workers earn only 35 cents or less per hour. Some of these low-paid men are workers in missions that operate salvage or other enterprises as a rehabilitation program, but others are employees of firms operating for profit.

In estimating wages, it was assumed that restaurant employees were given meals as a part of their pay, and the cash value of meals was added to the wages they reported. Hence, the wages per hour include such indirect payment.

Even though a very large proportion of the men are working at low rates of pay, significantly large numbers appear to have well-paying jobs. One-fifth of the men earned \$1.75 or more per hour, and one-half of these earned at the rate of \$2.00 or more per hour. Men on South Clark and Van Buren and on North Clark Streets tended to have higher paying jobs than men on West Madison and State Streets.

Hours worked per week. A disproportionately large share of Skid Row men work less than a full work week (35-40 hours); also a disproportionately small share work overtime (48 hours or more). This may be verified by examining the following statistics:

Table 2-13: Proportion of Employed Homeless Men on Chicago's Skid Rows who Held Steady and "Spot" Jobs During the Weeks Preceding Interview, Winter, 1958

Type of job held	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total, working....	100.0	100.0	100.0	100.0	100.0
Spot job.....	45.0	48.1	41.7	35.7	36.0
Steady job.....	55.0	51.9	58.3	64.3	64.0

Note: The above percentages are based upon the cases for which information was obtained. No information concerning type of job held was obtained from 0.5 percent of the respondents who had worked during the preceding week.

Table 2-14: Wages Per Hour Received by Homeless Men on Chicago's Skid Rows, Winter, 1958

Wages per hour	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
\$.00-\$.35.....	5.4	6.0	8.3	...	...
\$.40-\$.65.....	13.7	16.1	11.1	7.1	6.8
\$.70-\$.95.....	18.8	16.7	24.1	14.3	26.0
\$1.00.....	22.5	21.9	23.1	28.6	21.9
\$1.05-\$1.30.....	11.1	11.1	2.8	21.4	16.4
\$1.35-\$1.70.....	8.7	9.2	14.0	...	4.1
\$1.75-\$2.20.....	13.6	13.6	13.9	21.4	8.2
\$2.25 and up.....	6.2	5.3	2.8	7.1	16.4

Note: The above percentages are based upon respondents from whom information was obtained. No information concerning rate of pay was obtained from 1.2 percentage of the men who had worked during the preceding weeks.



Percent distribution of hours worked:  
Winter, 1957-58

Hours worked per week during December, January, February	Homeless men on Skid Row	Men in non- agricultural industries
Total.....	100.0	100.0
1-14 hours.....	23.9	4.9
15-34 hours.....	24.6	11.6
35-40 hours.....	28.1	50.0
41-47 hours.....	11.9	8.8
48 hours or more.....	11.3	24.7

Almost 1/4 of the workers had less than 15 hours of work during the week preceding the interview. This is a direct corollary of the "spot job" pattern described above.

Yet it would be incorrect to conclude that only part-time work is available to these men. Of those who worked, a majority (51 percent) worked 35 hours or more.

When converted to numbers rather than proportions, these figures indicate that of the approximately 12,000 men on Skid Rows, 4,800 are at work during the average week in winter. Of these men, about 2,400 work a full work week and 2,400 work part-time.

Part-time work is not forced upon all of the workers, although it undoubtedly is upon some. Many of the men prefer not to work every day, but drink and loaf after earning one or two day's pay. Other men go to the employment offices every day in an effort to find work, and get discouraged at their inability to get more than a day or two of work each week, if that much.

Wages per week. A combination of low wages and less than a full work week results in a low take-back-to-the-cubicle pay for homeless men on Skid Row. More than one-third of the men who work earn less in one week in midwinter than the amount allowed to clients on relief. Yet the relief allowance generally is regarded by welfare workers as inadequate to maintain an adult at a minimum level of health and decency. Yet almost 1/5 of the Skid Row men earn less than one-half this minimum amount. The median weekly earning was found to be \$29. This means that one-half of the working men have less than \$4.00 per day to spend for all living expenses.

In interpreting these figures it must be remembered that the cash value of meals or lodging received as part payment for work have been added to the money wages paid, so that the statistics represent total earnings.

When linked with the statistics cited above for the high level of unemployment, it can more readily be appreciated why the winter months present a desperate crisis for many of the men, and why mission soup lines are long.

The combination of low rates of pay, part-time work, and low earning is closely linked to the problem of chronic alcoholism and inability to hold a steady job because of drinking. Also, many of these part-time workers are pensioners who are supplementing their income. A later chapter will attempt to study the

Table 2-15: Hours Worked by Homeless Men on Chicago's Skid Rows During the Week Preceding Interview, Winter, 1958.

Hours worked last week	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and Others
Total.....	100.0	100.0	100.0	100.0	100.0
1 - 14 hours.....	23.9	23.7	37.0	14.3	12.3
15 - 34 hours.....	24.6	25.8	24.2	14.2	24.6
35 - 40 hours.....	28.1	28.2	19.5	35.7	35.6
41 - 47 hours.....	11.9	10.3	9.3	35.7	12.3
48 hours or more.....	11.3	12.0	10.2	...	15.0

Note: No information concerning the hours worked last week was obtained from 0.6 percent of the persons who worked. The above percentages are based upon cases for which information was obtained

Table 2-16: Wages Earned Per Week by Homeless Men on Chicago's Skid Rows, Winter, 1958.

Wages per week	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and Others
Total.....	100.0	100.0	100.0	100.0	100.0
\$0 - \$9.....	17.9	19.9	24.1	7.1	4.0
\$10 - \$19.....	17.4	18.5	24.0	7.1	6.7
\$20 - \$29.....	15.3	17.4	13.0	...	14.7
\$30 - \$39.....	9.5	6.0	11.2	28.6	17.3
\$40 - \$49.....	13.7	10.9	2.8	42.9	29.3
\$50 - \$69.....	14.0	14.3	19.5	...	12.0
\$70 and over.....	12.2	12.9	5.6	14.2	16.0

Note: No information concerning wages earned last week was obtained from 0.9 percent of the respondents who had worked. The above percentages are based upon cases for which information was obtained.

entire problem of rates of pay, hours of work, and pay received in terms of the needs of the individual and his willingness, ability, and qualifications for work.

Length of Residence on Skid Row. Each man was asked, "How long have you lived on Skid Row since the last time you arrived from some other place outside Chicago?" The results destroy rather effectively any notion that Skid Row is composed entirely of a group of highly transient persons. Less than 10 percent of the men had been on Skid Row for less than a month, and 55 percent had lived here longer than a year. One man in six (18 percent) had lived on Skid Row continuously for 10 years or more, and an additional 11 percent had lived there between 5 and 10 years. Moreover, these statistics count as short-term residents the many men who ship out each summer as "gandies" on the railroad maintenance gangs and return here each winter, or who have another seasonal cycle that brings them into Chicago for a part of each year. In short, a majority of the men are year-round residents. The transient "just passing through" and the hobo who follows the harvests are much more of a rarity now than they were 35 years ago when Nels Anderson wrote about Chicago's Skid Row and named it Hobohemia.<sup>1</sup>

The men of West Madison and South State streets are more mobile than those of North Clark and South Clark and Van Buren, and the men of South State are more mobile than those of West Madison. West Madison Street has traditionally been the "port of entry" for the wandering homeless man, and its hotels and taverns are known from Coast to Coast among the wanderers. Chapter 12 pursues in greater detail the movements of Skid Row men both within and outside Chicago.

Marital Status. The very fact that they are middle-age and family-less dictates that the homeless men of Skid Row have a marital status composition radically different from the general population. Table 2-18 indicates that in comparison with men 20 and over there is a considerable preponderance of men who have never married and of men who are widowed, separated, and divorced. Along Skid Row there is a saying that "95 percent of the men are here because of a woman." It certainly cannot be disputed that the residents are unique either in the fact that an extraordinarily high proportion failed to marry or, if they did marry, their marriage ended in separation or divorce.

Table 2-18 fails to show fully the extent of the discrepancy, because it fails to take into account the difference in age composition between the general population and the Skid Row population. A more exact comparison can be made by "standardizing" the marital status distribution for Skid Row men to the age distribution of all males over 20 years of age in the nation. (This consists merely in estimating what proportion of Skid Row men would be single, married, widowed, separated, or divorced if they had the same age composition as the general male population of the nation.) The results of such a comparison are as follows:

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Nels Anderson, The Hobo, University of Chicago Press; 1923.

Table 2-17: Length of Residence on Skid Row Since Last Coming to Chicago, Winter, 1958

Length of residence	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Transient and zero mos.	9.4	9.8	10.9	3.1	6.2
1 mo.-2 mos.....	11.4	12.3	9.0	7.3	10.9
3 mos.-5 mos.....	13.4	14.3	10.0	3.1	20.3
6 mos.-11 mos.....	10.2	10.0	9.3	12.4	12.5
1 yr.-1 yr. 11 mos.....	10.1	9.2	15.6	12.4	6.3
2 yrs.- 2 yrs. 11 mos..	8.5	8.7	9.3	9.3	4.7
3 yrs.-4 yrs. 11 mos...	8.0	6.2	10.9	15.5	15.6
5 yrs.-9 yrs.....	10.9	9.8	10.5	15.5	18.7
10 yrs.-19 yrs.....	12.7	13.6	12.1	15.5	4.7
20 yrs. and over.....	5.2	6.3	2.3	6.2	...

Note: No information concerning length of residence on Skid Row was obtained for 0.8 percent of the respondents. The above percentages are based upon cases for which information was obtained.

Table 2-18: Marital Status of the Homeless Men on Chicago's Skid Row, Winter, 1958

Marital status	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Never married.....	44.1	47.5	34.3	44.0	32.1
Married.....	2.8	3.3	0.8	3.0	2.3
Separated.....	13.5	11.3	21.4	14.0	17.6
Widowed.....	10.6	8.5	17.7	12.0	15.3
Divorced.....	29.0	29.4	25.8	27.0	32.8

Note: No information concerning marital status was obtained for 2.4 percent of the respondents. The above percentages are based upon cases for which information was obtained.

Marital status:	Difference as ratio of U. S. proportion	Marital status of males 20 years and over, U. S., 1950	Standardized marital status of Skid Row men, 1958
Total. . . . .		<u>100</u>	<u>100</u>
Never married. . . . .		17	64
Married. . . . .		74	2
Separated. . . . .		2	8
Widowed. . . . .		5	6
Divorced. . . . .		2	20

Thus, the proportion of single men among the Skid Row population is about 4 times as great and divorce is 9 times as prevalent as among the national population, when the factor of age difference is controlled. More than 40 percent of all men on Skid Row have tried marriage but have had it end in divorce or separation. The role which family discord and incompatibility between husband and wife plays in the arrival at Skid Row will be analyzed in detail in a later chapter.

Health Status. "How is your health? Would you say it is excellent, good, fair, or poor?" was a question asked of each respondent. Although this is a somewhat subjective way of measuring the healthiness of a population, it has been found to differentiate quite effectively among sick and well people. In general, the men of Skid Row tend to be less healthy than the general population, even when allowance is made for their older age composition. The following proportions bear this out:

<u>Percent in each health category</u>	<u>Skid Row men standardized for age</u>	<u>U. S. general population*</u>
Excellent health. . . . .	18	32
Good health . . . . .	46	38
Fair health . . . . .	23	23
Poor health . . . . .	12	7

\*Source: Jacob J. Feldman and Paul B. Sheatsley, Chapter 5A in an unpublished manuscript entitled "Subjective Factors in Utilization of Medical Facilities."

The proportion of homeless men who report themselves to be in excellent health is only about one-half as great as among the general population, and the proportion who say that they are in poor health is 70 percent greater than among the general population.

In addition to this general question about health, each man was quizzed in detail concerning illnesses he had experienced during the past three months and during the past year, so that all disabilities and sicknesses were obtained. A later chapter will report in detail on the health of the men in comparison with the general public. Not only will the types of sickness that contribute to this poorer health be identified, but the effect of these illnesses in shortening life expectancy will be measured.

## Chapter 3

### THE HOUSING AND LIVING ACCOMMODATIONS OF HOMELESS MEN

#### ON CHICAGO'S SKID ROW

This chapter will attempt to describe the living accommodations that are available for men on Chicago's Skid Row. It is not known how these conditions compare with the situation in other cities. The account will be as objective and factual as possible, and submitted without judgment whether the situation is "good" or "bad" and without making suggestions either for maintaining the status quo or for making a change. These are subjects for discussion and decision by agencies charged with planning and administering urban renewal and related programs. The question of "What to do about housing conditions on Skid Row?" is a very difficult one to answer. On the one hand, almost all of the residents of Skid Row live in places that, by the current definitions used by housing experts, would be considered "substandard" and in which the average male lodger would prefer not to live. The average member of a family or the average lodger in a private room, even in the most deteriorated slums, has more privacy, space and physical comfort than the average resident of a cubicle-type hotel. In terms of the number of square feet of living space, bathing facilities, facilities for living, the cubicle offers less than any other type of housing in the city. This is one of the principal reasons why it is cheap. On the other hand, some persons would argue that this is a special situation in which the residents do not necessarily even want better living quarters or, if they do want better housing, are not the type of people who could appreciate it, take care of it, and benefit from having received it. They would, the argument runs, immediately blight any kind of housing into which they are placed, because they are not clean in their personal habits and because their drunken sprees lead to the accumulation of filth and to destruction. Some might proceed even further and declare that even if some improvement and rehabilitation could result from rehousing these men at a higher level, a high proportion of the residents do not merit such a gift, because providing such housing would do less to improve the community at large than investing an equivalent amount of funds in other neighborhoods where there are families and children. Thus, there is a difference of opinion between those who wish to "raise the minimum level below which no citizen is allowed to sink," and those who would perform a calculation whereby funds for welfare and housing would be distributed in such a way as to "do the greatest good for the greatest number." In both cases, there is little question that the housing involved is below the minimum standard acceptable to the general population.

The researchers who designed this study surmised that the answer to this housing question would differ for the various groups of men on Skid Row. In other words, there may not be one housing question, but several: what to do for elderly retired men, for working men, for transients, for resident chronic alcoholics, etc. If this is true, the decisions concerning urban renewal and rehousing would depend less upon the actual physical conditions that prevail than upon information about the men themselves, for such knowledge is required before planners and renewal experts can evaluate the question concerning "how much good it would do" if one of several alternative courses of action were pursued.

Types of living quarters. In general, there are three major types of living quarters available for homeless men on Skid Row: cubicles, dormitories, and single rooms (either in hotels or lodging houses).<sup>1/</sup>

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<sup>1/</sup>It must not be presumed that the living conditions described here are identical in all hotels and rooming houses; the exact contrary is true. Depending largely upon the policy of the management and the age and condition of the building, there is a great deal of differentiation among them.

The cubicle was defined briefly in footnote 1 in the first page of Chapter 1. Because it is a unique phenomenon of these neighborhoods, it may require further description.

The partitions between cubicles are made of thin fire-resistant material. Plasterboard (1/4 inch or 3/8 inch) or corrugated metal (barn roofing) are the most usual materials. The bed consists of an army-type cot with a thin cotton mattress, two sheets, and a blanket. The only other furniture present is a chair or a stool, and sometimes a metal locker into which clothes may be placed. (The locker is not always present; sometimes hooks on the door replace the locker.) A bare 15-watt bulb, suspended at the height of the chicken wire netting, provides illumination. Each cubicle has a wooden door with a lock. The man is expected to keep his cubicle locked at all times (even for short trips to the lavatory), and to leave the key at the main desk when he leaves.

Since the cubicle walls are thin and not made of soundproof materials, and because there is a six-inch gap between the floor and the bottom of the partition and a chicken wire ceiling, the sounds and odors of each occupant are shared by all. In the wintertime, when almost everyone on the street seems to have a heavy cold, a chorus of coughing continues throughout the night. Talking, even in conversational tones, travels throughout the spaces, so that a friendly conversation conducted in normal tones will annoy persons who are trying to sleep. Many occupants of these hotels sleep in the daylight hours because they hold jobs that require evening or night work. Men coming in from the street when most of the patrons have gone to bed, especially if they have been drinking, can create a disturbance that will awaken the entire floor and evoke shouts of rage to "shaddap". Not infrequently men who have drunk heavily will get into an argument with each other or will lie in their beds and go into a "talking jag" of babbling and soliloquizing on varied and diverse topics. Men on Skid Row call these enemies of sleep "talking drunks." Hotel managers must try to keep this kind of a disturbance to a minimum. They usually forbid visiting in cubicles (also a precaution against theft and other disturbances) and try to maintain quiet. Several have porters stationed on each floor who act as a combined fire watch and enforcers of peace. In at least one hotel the management has installed a public address system on each floor with a microphone feeding into a loudspeaker in the clerk's cage. When the noise level exceeds the limit allowed, a porter is dispatched to the scene.

Like sounds, odors are communal property in the cubicle-type hotel. Bathing facilities, now required by law, are not used frequently in midwinter, and the space housing 50 to 100 long-unwashed bodies sleeping in long-unwashed clothing,<sup>1</sup> where the windows are kept closed for economy in heating and to prevent drafts, becomes very fetid indeed. This is compounded by the fact that drunken men may become sick in their cubicles after they have locked themselves in, and may pass out or fall asleep, adding the stench of their vomit to the already foul air. Also, drunken men often attempt to urinate in wine or whiskey bottles in order to avoid visiting the toilet and many of the older men keep an uncovered gallon can under their bed because they are afraid of being jackrolled or having their clothes and room key taken in the toilets late at night. At six or seven o'clock A. M. on a winters day, before the clean-up crews begin to work, the combined body-vomit-urine smell creates a very burdened atmosphere.

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<sup>1</sup>Because of theft, the hotels usually provide no towels or else demand a 10¢ or a 25¢ deposit on a towel. Many men have money only enough to afford the price of a room, and cannot obtain a towel. Also, men are afraid to bathe, because their clothes may be stolen while they are in the shower or tub. The manager of one hotel that charges only 10¢ deposit per towel, with the understanding that each time a towel is returned a clean fresh one can be obtained without charge, reports that for each 100 cubicle-days, only about 6 clean towels are called for.

Some hotels make a conscientious effort to minimize the inconveniences of cubicle life. They refuse to rent rooms to men known to be heavy drinkers or trouble makers. They evict men who create a disturbance, and when jackrollers are caught they are given an unmerciful beating. Consequently, these hotels tend to be quieter, cleaner, and more amiable than the average. But the drinkers and the trouble makers must sleep somewhere. The hotels with a more lax policy that admit them come to be known as "wino joints." These hotels are noisier, harder to keep clean, smellier, and have more jackrolling and violence than the average. Two or three of the very quietest cubicle-hotels probably are no more disorderly on Saturday night than the average hotel in Chicago's Loop. The men know which are the very noisiest hotels and avoid them unless they want to be near drinkers. When the residents of these hotels create a disturbance, the probabilities are reasonably good that they are disturbing men who themselves create disturbances.

Number of sleeping spaces. In the course of contacting each place where homeless men live in order to draw a sample for the interviewing, information was obtained concerning the number of cubicles or rooms available for rent and the number occupied. There are almost 12,000 cubicles and room intended for use by residents of Skid Row. This is exclusive of beds available in missions and in the rooming houses. Since only 806 men were found living in rooming houses (Chapter 2), the hotels house about 92 percent of the men who purchase lodging from commercial lodging places. A very large share of these sleeping spaces are highly concentrated in a very few big cubicle-type hotels, and the remainder are scattered among smaller places. The following summary present the picture succinctly.

Type and size of place	Number of hotels	Number of sleeping places	Percent of all sleeping places in mens hotels
Total . . . . .	<u>71</u>	<u>11,943</u>	<u>100.0</u>
Cubicle-type hotels, total. .	<u>34</u>	<u>10,125</u>	<u>84.8</u>
Very large (500 or more). .	6	3,703	31.1
Large, other (300 to 500) . .	7	2,523	21.1
Medium (200 to 300) . . . .	9	2,118	17.7
Small (Less than 200) . . . .	12	1,781	14.9
Hotels with rooms . . . . .	37	1,818	15.2

Thus, about 30 percent of all Skid Row accommodations are in the six largest cubicle-type hotels, and the 13 largest cubicle-type hotels comprise above one-half. The 37 hotels with rooms comprise only about one-seventh of all housing available for homeless men.

How the sleeping spaces are distributed among the various Skid Row areas is reported in table 3-1. Eight of the 13 large cubicle-type hotels are located on West Madison Street; 4 are on South State, and 1 is on the South Clark-Van Buren area. The facilities of North Clark Street consist almost wholly of hotels with rooms and rooming houses, while South Clark-Van Buren offers only cubicles. State Street's Skid Row also is housed preponderantly in cubicles.



Vacancies and vacancy rates. Estimates of vacancies and vacancy rates were a by-product of the sampling procedure for obtaining interviews. A record was kept of the number of sleeping spaces in each hotel that remained unrented for a 24-hour period, and this was accepted as the current extent of vacancy at the time of the interviews.<sup>1</sup> Vacancy rates for each type of hotel, and for each of the Skid Row areas are shown in table 3-2. In the winter of 1957-58, an average of one cubicle in 5 was vacant (21 percent), and one hotel room in 12 was empty (8 percent). The vacancy rates on South State Street were extraordinarily high, for all types of housing. In fact, they were almost twice the rates for the other Skid Row areas. On West Madison Street, the highest vacancy rates occurred in the medium-size and small cubicle hotels, while on South State Street the larger places had the highest vacancy rates.

From these figures on vacancy, the following inferences are justified:

- (a) The supply of Skid Row housing is more than adequate to meet present needs. Peak occupancy is usually reached in early spring, rather than in winter, but the spring increase over winter is not sufficiently great to cause a shortage. In fact, it appears possible that if decreed, not less than 6 and perhaps as many as 10 or 12 of the oldest, least fire-resistant, and most poorly maintained flophouses (these tend to fall in the small and medium-size categories) could be purchased and razed without creating a shortage of housing for homeless men. This could be accomplished by having expert inspectors from private fire insurance companies make an impartial rating, taking into account wooden stairways, wooden floors, width of doors and passage ways, fire-producing uses on the first floor over which many cubicle hotels are located, etc., and the knowledge and ability of personnel to take the proper action in case of fire. Such an action would greatly reduce the threat of future flophouse fires.
- (b) Owners and operators of hotels are having to compete with each other for business, and there is a "buyers market." Several hotels have one or more floors sealed off, with all beds stripped, for lack of tenants. In the face of this situation, the men are patronizing those places that "give them the most for their money," and the vacancy rate is a fairly good indicator, on each street, of how well the men think the place is being operated and the amenities it offers. It might be inferred that in such a climate, hotel owners would be more willing to make improvements and provide more facilities for their guests than if there were a shortage of rooms.
- (c) In all areas, hotels with rooms have lower vacancy rates than cubicle-type hotels. However, on West Madison Street, a few of the largest cubicle hotels have extremely low vacancy rates, so that the vacancy rates for large cubicle-type hotels are not a great deal higher than the vacancy rates for hotels with rooms.
- (d) South State Street has such an extremely high vacancy rate that its position as a Skid Row economic center seems to have changed. Several long-time observers reported that Skid Row here is dying--that it "ain't what it used to be."

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<sup>1</sup>In a few cases where this system broke down because of special difficulties, the management was asked to report the number of spaces that had remained unrented throughout the night before the interviewing began, or to report its average number of vacancies for the past week.

Table 3-1: Number of Sleeping Spaces Available for Rent in Hotels for Men on Chicago's Skid Rows, Winter, 1958.

Type of hotel	Total all Skid Rows	Skid Row area			
		West Madison Street	South State Street	North Clark Street	South Clark, Van Buren & others
Total hotels for men.....	11,943	7,493	2,015	755	1,680
Cubicle-type hotels, total..	10,125	6,339	1,902	249	1,635
Large (300 or more).....	6,226	4,226	1,463	...	537
Medium (200 to 300).....	2,118	1,150	...	249	719
Small (Less than 200)....	1,781	963	439	...	379
Hotels with rooms.....	1,818	1,154	113	506	45

Table 3-2: Percent of Sleeping Spaces Vacant in Hotels for Men on Chicago's Skid Rows, Winter 1958.

Type of hotel	Total all Skid Rows	Skid Row area			
		West Madison Street	South State Street	North Clark Street	South Clark, Van Buren & others
Total hotels for men.....	11	17	31	9	13
Cubicle-type hotels, total..	21	18	35	(a)	(a)
Large (300 or more).....	26	13	36	...	(a)
Medium (200 to 300).....	16	34	...	(a)	20
Small (Less than 200)....	8	22	30	...	...
Hotels with rooms.....	8	10	26	4	...

(a) Withheld to avoid disclosing information for individual hotels.

PHYSICAL CONDITION OF HOTELS AND ROOMING HOUSES

Information concerning the physical condition of the hotels and rooming houses on Skid Row was not obtained from a direct survey of structures. However, the records of official inspections made by the Fire Prevention Bureau and the Department of Buildings of the City of Chicago were searched and a tabulation made of the deficiencies found. A series of disastrous flophouse fires in which several lives were lost, had led to a complete inspection of Skid Row hotels and rooming houses by the Fire Prevention Bureau in the winter of 1955, and a building inspection by the Department of Buildings in the spring of 1956 and again in the autumn of 1957. The materials presented below have been abstracted from the records of these inspections, and refer to the conditions that existed at the time of the surveys.

**INADEQUATE BUILDING CONDITIONS.** Table 3-3 lists 17 conditions of inadequacy for which Skid Row hotels and rooming houses were inspected by the Department of Buildings, City of Chicago, in 1956 and 1957. This table shows what percent of the structures, classified according to size, were found to have each deficiency. It also reports the number of sleeping spaces in hotels where these deficiencies occur. In interpreting these tables it must be remembered that the building inspection was made with reference to the official building code of the city, which specified the "minimum allowable" conditions, rather than "desirable" or "ideal" conditions. From this perspective, the following items of information may be gleaned from this table.<sup>1</sup>

Plumbing could be found to be inadequate on three scores: (a) insufficient number of washbowls, toilets, and bathing facilities; (b) plumbing fixtures not in good operating condition; and (c) the plumbing fixtures were not clean. More than two-thirds (69 percent) of the hotels did not have sufficient plumbing facilities to meet the code requirements. Among larger cubicle-type hotels the proportion unable to meet the requirements was more than 90 percent.<sup>2</sup> Action has already been taken to bring all hotels into line with the present requirements of the building code. With respect to cleanliness and operating condition, it was found that more than 25 percent of the large and medium size cubicle hotels had plumbing fixtures not in good operating condition. About one-sixth of the sleeping spaces in hotels were in structures where this condition was present. Plumbing fixtures were not clean in hotels housing about 1300 sleeping spaces, or about 8 percent of all sleeping spaces. In general, the situation with respect to plumbing--amount of facilities, maintenance in operating condition, and cleanliness was considerably poorer in the cubicle-type hotels than in the hotels with rooms, and was present in cubicle-type hotels of all sizes.

<sup>1</sup>The validity of all materials presented here rests upon an assumption that the inspectors rated all establishments impartially, and were not influenced by the size, wealth, or influence of the management.

<sup>2</sup>The Building Code of the City requires one toilet and one shower or both in cubicle-type hotels for each 20 residents. This code also requires 40 square feet of floor space per cubicle. The area of passageways may be included in the area calculations. In other words, if the total number of square feet of floor space, including passageways between cubicles, divided by the total number of cubicles is 40 or more, the requirements of the code are satisfied. The calculation is made for each floor of a structure separately. Floor space in toilets and showers are excluded from the calculations. Hence, the 35 square foot cubicle, which is the standard size in most hotels, is not in violation of the Building Code.

If it can be presumed that the hotels where toilets and washing facilities were not clean were also among those where the plumbing fixtures were not in good operating condition, then it can be concluded that for not less than 1/12 of the sleeping spaces (1,300 spaces) an improper condition existed where plumbing facilities were unclean and not in good operating condition. In most of these same cases there were insufficient facilities to meet the requirements of the building code as it existed at the time of the survey.

Cleanliness. At the time of the inspection, the floors in 25 of the hotels were reported to be "not clean and sound" (to quote the language of the inspection forms) and in more than 50 hotels the walls and ceilings were not "clean and sound." In general, the cleanliness record of Skid Row hotels was not very good, irrespective of size or type. More than one-sixth of small cubicle hotels had floors that were sufficiently unclean to evoke report by the inspectors, and one-half had unclean walls or ceilings. This rating of unclean is one of minimum allowable cleanliness, and is oriented toward evidence of long-term maintenance (the evidences sought are for long-term neglect of cleanliness, rather than merely for failure to clean on the day of the inspection).

Trash and improper storage. Inspectors found frequent situations where trash was not disposed of properly and materials were improperly stored. The number of instances were:

	<u>Number of hotels</u>		
	<u>Total</u>	<u>Cubicle hotels</u>	<u>Hotels with rooms</u>
Materials improperly stored under stairs. . . .	10	0	10
Refuse or junk in basement. . . . .	25	4	21
Halls, stairs obstructed by stowed materials. .	17	1	16
Garbage removal inadequate. . . . .	4	0	4
Garbage improperly stored . . . . .	16	5	11

The offenders on most of these items were not the cubicle-type hotels, but the small hotels with rooms.

Rats and vermin. Evidence of rats was found in 2 hotels and evidence of vermin in ten hotels. Almost all of this was found in the small hotels with rooms; only one cubicle-type hotel was cited for vermin. Since the invention of DDT the problem of vermin control has been greatly simplified. Most of the hotel managements reported that they have routine procedures for controlling vermin. If a cubicle is infected by a patron, that cubicle and all those surrounding it are sprayed throughly. Men who are found to have body lice usually are given the choice either of going to the municipal "delousing station" (where they can be decontaminated free) or of being expelled from the hotel. Lice are now a serious problem only among places that cater to transients or that accept men who often sleep under bridges or in doorways in their clothes, or who sleep in no regular place and have no change of clothes. Ironically, some of the mis-sions are among such places.

Number of inadequacies in building conditions. Thirty-two hotels were found to have not a single one of the inadequate building conditions listed in table 3-3, and an additional 35 were found to have only one of these conditions. Forty percent of the hotels had 3 or more deficiencies, and 13 percent (involving 12 percent of the living units) had 5 deficiencies or more.

Table 3-3: Types of Building Deficiencies in Skid Row Hotels, 1956-57

Type of deficiency	Percent having deficiency					Sleeping spaces all hotels
	Structures				Hotels with rooms	
	All hotels	Cubicle hotels				
	Large	Medium	Small			
Plumbing fixtures not in good operating condition.....	9.5	25.0	28.6	9.1	5.8	16.0
Inadequate plumbing, one or more floors.....	69.0	91.7	92.9	81.8	62.8	81.3
Plumbing fixtures not clean..	2.5	16.7	7.1	9.1	...	8.5
Heating inadequate.....	1.3	...	...	...	1.7	0.2
Hot water not adequate.....	1.3	...	...	...	1.7	0.3
Overcrowding of space.....	1.9	8.3	7.1	...	0.8	4.7
Floors not clean and sound...	15.8	8.3	14.3	18.2	16.5	13.4
Walls not clean and sound....	31.0	41.7	35.7	45.5	28.1	38.2
Ceilings not clean and sound..	33.5	33.3	21.4	54.5	33.1	30.7
Materials improperly stored under stairways.....	6.3	...	...	...	8.3	2.2
Basement wet or in poor condition.....	11.4	...	14.3	18.2	11.6	7.2
Refuse or junk in basement...	15.8	8.3	14.3	9.1	17.4	12.5
Garbage improperly stored....	10.1	16.7	14.3	9.1	9.1	12.9
Garbage removal inadequate...	2.5	...	...	...	3.3	0.7
Halls, stairs, exits obstructed	10.8	...	...	9.1	13.2	6.0
Evidence of rats.....	1.3	...	...	...	1.7	0.4
Evidence of vermine.....	6.3	...	7.1	...	7.4	3.5

Table 3-4: Number of Building Deficiencies in Skid Row Hotels, 1956-57

	Percent having deficiency					Sleeping spaces all hotels
	Structures				Hotels with rooms	
	All hotels	Cubicle hotels				
	Large	Medium	Small			
Number of places, total.....	100.0	100.0	100.0	100.0	100.0	100.0
No building deficiencies	20.3	8.3	7.1	9.1	24.0	13.6
1 deficiency.....	22.2	8.3	50.1	9.1	21.5	19.4
2 deficiencies.....	17.7	50.1	7.1	18.2	15.7	33.2
3 deficiencies.....	13.9	8.3	14.4	36.3	12.4	11.2
4 deficiencies.....	12.7	16.7	...	27.3	12.4	10.7
5 deficiencies.....	5.7	...	7.1	...	6.6	4.8
6 deficiencies.....	3.8	8.3	7.1	...	3.3	4.2
7 deficiencies.....	2.5	...	...	...	3.3	1.1
8 or more deficiencies.....	1.2	...	7.1	...	0.8	1.8

In summary, it might be said that hotels with rooms tend to be concentrated at the two extremes of being either very good (large numbers having no building deficiencies or only one deficiency) or of being extraordinarily poor (having large numbers of deficiencies). The cubicle-type hotels tend to occupy an intermediate position, a large proportion tending to have 1 or 2 deficiencies, with a disproportionately large number of the smaller cubicle hotels having 3 or 4 deficiencies. A rough ranking of the various types of housing according to their conformity with the building code of the City of Chicago can be made as follows:

Hotels with rooms (good management)  
 Large and medium size cubicle hotels  
 Small cubicle hotels  
 Hotels with rooms (poor management)

**FIRE PROTECTION DEFICIENCIES.** The purpose of the inspection of Skid Row hotels by the Bureau of Fire Prevention was to discover instances of inadequate fire protection measures and to take action to correct such situations. The records of this inspection, therefore, reflect conditions that existed prior to the program of decreasing the vulnerability of the hotels to fire. The most serious deficiencies cited were, in descending order of prevalence:

	<u>Percent of hotels</u>
Lack of a sprinkler or standpipe system . . . . .	86.7
Hotel stairways not enclosed with fire resistant material . .	60.7
Hotel personnel not organized to fight fire . . . . .	55.1
Hotel has no fire alarm system. . . . .	36.7
Hotel has no fire prevention program. . . . .	29.1
Floors not systematically patrolled at night. . . . .	20.9
Flammable liquid improperly stored on the premises. . . . .	14.6
No emergency lighting system. . . . .	14.6
Hotel has no fire warnings or instructions for guests . . . .	13.3
Exit doors do not swing outward . . . . .	12.0
Good housekeeping conditions do not prevail . . . . .	9.5
Fire extinguishers not recharged last 12 months . . . . .	8.2
Hotel personnel ignorant of how to report fire via alarm box.	7.0
Obstructions blocking entrance to fire escapes. . . . .	7.0
Fire escapes not in good condition. . . . .	5.1
Fire extinguishers not properly tagged. . . . .	5.1
Doors to stairways not properly equipped with self-closing devices . . . . .	5.1
Electric wiring does not conform to city's standards. . . . .	5.1
No crash or glass panels in doors leading to fire escapes . .	4.4
Insufficient ash trays. . . . .	2.5
Doors to exits do not have illuminated signs. . . . .	1.3

The proportion of all hotel living units affected by each deficiency is noted in the right hand column of table 3-5. For many of these deficiencies, 20 percent or more of the total living spaces are affected. As this table shows, for most of these items the greatest prevalence was in the small cubicle hotels and hotels with rooms.

Number of fire prevention deficiencies. Skid Row hotels tended to have many more fire prevention deficiencies than building deficiencies, as a comparison of table 3-6 with table 3-4 will show. An impressively large proportion of structures was found to have 5, 10 or even 15 or more deficiencies. Some of these deficiencies were minor, while others were more serious. As was found for building deficiencies, the structures having the greatest number of fire

Table 3-5: Types of Fire Protection Deficiencies in Skid Row Hotels, 1955

Type of deficiency	Percent having deficiency					Sleeping spaces all hotels
	Structures				Hotels with rooms	
	All hotels	Cubicle hotels				
	Large	Medium	Small			
Floors not systematically patrolled at night <sup>(a)</sup> .....	20.9	8.3	7.1	9.1	24.8	15.7
Stairways not enclosed.....	54.4	...	14.3	36.4	66.1	22.4
Stairways not enclosed with fire resistant material.....	6.3	...	7.1	...	7.4	3.6
Doors to stairways not equipped with self-closing device.....	5.1	8.3	...	...	5.8	4.9
Exit doors do not swing outward.....	12.0	...	...	...	15.7	2.8
Obstruction blocks exit to fire escapes.	7.0	...	7.1	...	8.3	3.5
No crash or glass panels in doors to fire escapes.....	4.4	8.3	...	9.1	4.1	4.1
Doors to exits do not have illuminated signs.....	1.3	...	...	...	1.7	0.5
No emergency lighting system.....	14.6	8.3	7.1	...	17.4	9.2
Electric wiring does not conform to city's electric standards.....	5.1	...	...	...	6.6	1.9
Hotels lack a fire alarm system.....	36.7	66.7	...	27.3	38.8	40.1
Hotel has no provision for fire brigade.	55.1	66.7	100.0	90.9	45.5	68.3
Fire brigade does not function continuously.....	...	...	...	...	...	...
Ignorance of how to report fires via alarm box.....	7.0	16.7	14.3	...	5.8	9.2
No fire warnings or fire instructions for guest.....	13.3	8.3	7.1	27.3	13.2	12.3
Insufficient ash trays.....	2.5	8.3	7.1	...	1.7	3.8
No fire prevention program.....	29.1	16.7	14.3	9.1	33.9	21.5
Fire extinguishers not properly tagged..	5.1	...	...	...	6.6	1.8
Fire extinguishers not recharged in last 12 months.....	8.2	...	7.1	9.1	9.1	3.8
Hotel has no standpipe system.....	85.4	75.0	85.7	90.9	86.0	87.6
Hotel has no sprinkler system.....	86.7	75.0	92.9	81.8	87.6	88.0
Flammable liquid is stored on premises..	14.6	...	7.1	9.1	17.4	9.2
Fire escape not in good condition.....	5.1	...	...	...	6.6	2.7
Good housekeeping conditions do not prevail.....	9.5	...	...	...	12.4	4.2

(a) Patrolled at less than hourly intervals or irregularly, if at all.

prevention deficiencies were the small cubicle hotels and the hotels with rooms. The information contained in this table suggests quite strongly that before the Fire Prevention Bureau's inspection the level of preparedness and precaution against fire was quite low. This inspection and the ensuing program is now 3 years old. It is not known to what extent all deficiencies have been corrected or the extent to which fire fighting equipment and fire precautions are now being maintained.

**TOTAL INADEQUACIES.** The results of the inspection for building deficiencies were combined with those for fire prevention deficiencies. Only 4 structures, housing 66 homeless men, had no deficiencies of any kind. At the other extreme, 17 structures had 15 different deficiencies or more. All of these establishments were hotels with rooms. Together they housed 3.5 percent of all homeless men. An additional 32 structures, housing 17 percent of the homeless men, have between 10 and 14 building or fire prevention deficiencies combined. Three of this second group were cubicle hotels, two of them were large and one was medium size.

In general, the greatest concentration of multiple deficiencies were found in the small cubicle hotels (those containing less than 200 sleeping units) and the hotels with rooms, but no class of hotel was exempt from having numerous deficiencies.

**SPECIFIC INADEQUACIES.** After considering the building deficiencies as two major groups it might be well to consider in more detail certain ones of the specific deficiencies.

Age of structures. The great preponderance of the Skid Row hotels are located in structures that are very old. On Chicago's Skid Rows, about 2/3 are in structures 70 years old or older, and only a comparatively few are younger than 40 years of age. The oldest structures are those housing small cubicle hotels and hotels with rooms, while the youngest structures are the large cubicle-type hotels. Many persons who are administratively responsible for aspects of Skid Row may not be familiar with the fact that several of the largest cubicle-type hotels were designed and built to be fireproof flophouses shortly after 1920, or were converted from other large and fire resistant buildings shortly before 1920. These hotels occupy their own first floor and hence do not have a fire-hazard from a tavern, restaurant, or other business. They have cement floors, wide stairways, and fire resistant partitions. Such places appear to offer comparatively little opportunity for a conflagration, for the amount of combustible material in a single cubicle (mattress and bedlinen) is not great enough to burn through the partitions. There appears to be little danger that fires originating in the basement would spread to other parts of these buildings. Most of the older structures have wooden floors, walls, and stairs. A disastrous fire could begin either in a cubicle, in the load bearing walls, or in the basement and could quickly consume the building. This helps to explain why the large and medium size cubicle hotels were found to have fewer fire and building violations.

Width of stairs. The fire records showed the width of main stairway passages to cubicles or rooms. In more than one-third of the small cubicle hotels and the hotels with rooms, the width was less than 3 feet (30-35 inches). In several instances, these narrow stairways lead to a cubicle hotel housing 100-175 men. A large share of the remainder of these places had stairways of 2½ to 3 feet width. All of the large cubicle-type hotels had stairways 3 feet wide or wider, and ¼ or more of them had stairways 4 feet wide or wider. Almost none of the medium size or small cubicle hotels had 4 foot stairways.



Table 3-6: Number of Fire Prevention Deficiencies in Skid Row Hotels

Number of deficiencies	Percent having deficiency					Sleeping spaces all hotels
	Structures				Hotels with rooms	
	All hotels	Cubicle hotels				
		Large	Medium	Small		
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
No deficiencies.....	6.3	...	...	...	8.3	1.5
1 deficiency.....	1.3	...	7.1	...	0.8	2.9
2 deficiencies.....	8.9	33.3	7.1	9.1	6.6	21.0
3-4 deficiencies.....	30.9	41.7	57.2	54.5	24.8	37.9
5-6 deficiencies.....	15.8	8.3	21.5	27.3	14.9	18.0
7-9 deficiencies.....	18.4	16.7	7.1	9.1	20.7	11.5
10-14 deficiencies.....	12.7	...	...	...	16.5	5.4
15 deficiencies and over.....	5.7	...	...	...	7.4	1.8

Table 3-7: Number of Deficiencies ( building deficiencies and fire protection deficiencies combined) in Skid Row Hotels, 1955-57

Number of deficiencies	Percent having deficiency					Sleeping spaces all hotels
	Structures				Hotels with rooms	
	All hotels	Cubicle hotels				
		Large	Medium	Small		
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
No deficiencies.....	2.5	...	...	...	3.3	0.4
1 deficiency.....	1.3	...	...	...	1.7	0.3
2 deficiencies.....	4.4	8.3	7.1	...	4.1	7.5
3-4 deficiencies.....	13.3	25.0	21.4	9.1	11.6	20.7
5-6 deficiencies.....	17.1	33.3	28.6	45.4	11.6	27.3
7-9 deficiencies.....	30.4	8.3	35.8	45.5	30.6	23.1
10-14 deficiencies.....	20.3	25.1	7.1	...	23.1	17.2
15 deficiencies and over.....	10.7	...	...	...	14.0	3.5

Table 3-8: Age of Structures in Which Skid Row Hotels are Located

Age of structure	Percent distribution						
	All hotels	Cubicle hotels			Hotels with rooms	West Madison Street hotels	
		Total	Large	Medium			Small
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
100 years or more.....	1.0	...	...	...	...	2.0	1.0
80-90 years.....	8.0	5.0	...	7.0	9.0	9.0	2.0
70-79 years.....	47.0	38.0	24.0	30.0	64.0	51.0	45.0
60-69 years.....	17.0	16.0	17.0	21.0	9.0	17.0	23.0
50-59 years.....	4.0	5.0	...	14.0	...	3.0	5.0
40-49 years.....	3.0	8.0	17.0	7.0	...	1.0	3.0
Under 40 years.....	6.0	14.0	25.0	14.0	...	3.0	7.0
Not reported.....	14.0	14.0	17.0	7.0	18.0	14.0	14.0

Inspection of fire equipment. If it can be accepted that firefighting equipment should be inspected once each year and recharged if necessary, then the extent to which hotels are sincerely concerned about fire prevention and safety may be measured by the extent to which they arrange for such an inspection. In about 1/4 of the hotels the firefighting equipment had not been inspected for more than a year. The large cubicle-type hotels had the best record (all but one hotel had been inspected). The small cubicle-type hotels had the poorest record; more than 1/4 of them had not inspected their fire equipment for more than a year. The average performance of hotels with rooms probably was no better, for only 40 percent reported positively that such an inspection had been made, "no report" was made for most of the balance. The several medium size cubicle hotels had a moderately poor record; 14 percent (1 in 6) had failed to inspect its fire extinguishers and other firefighting equipment.

Fire patrol. One-fourth of the large cubicle hotels have fire guards stationed on each floor throughout the night as a fire watch. In other hotels a night porter or watchman makes the rounds of each floor at half-hourly or hourly intervals. In a few hotels, primarily the small cubicle hotels and hotels with rooms, the night fire patrol comes at intervals more than one hour apart.

Type of place	Half-hourly patrol	Hourly patrol	More than 1 hour	No patrol	No report
Cubicle hotels					
Large cubicle hotels . . . . .	42	42	0	8	8
Medium size . . . . .	50	43	0	7	0
Small size . . . . .	18	64	9	0	9
Hotels with rooms . . . . .	2	12	20	4	62

Table 3-9: Percentage of hotels which have inspected fire extinguishers within the past 12 months.

Type of residence and Skid Row area	Fire equipment last inspected		
	within past year	more than a year ago	no report
Total, all units.....	49	7	44
Cubicle-type hotels, total.....	79	16	5
Large.....	92	8	0
Medium.....	79	14	7
Small.....	64	27	9
Hotels with rooms.....	40	4	56
West Madison Street, all types of hotels.....	47	6	47

## HOUSING PREFERENCES OF HOMELESS MEN

Each homeless man interviewed was asked the questions,

"Suppose some of the men's hotels on (Skid Row) are torn down to make way for better housing. And suppose that new housing is to be built especially for you men who live here, to rent at a price you can afford to pay. WHAT KINDS OF PLACES TO LIVE SHOULD BE BUILT FOR YOU?"

"Here is a list of different kinds of places: open dormitories, cubicles or cages, single rooms for each man, like at a YMCA, apartments where two or three men could live together and do their own cooking and house-keeping. Which of these would you like best for yourself?"

The responses to these questions are tabulated in table 3-10. Two types of housing were preferred overwhelmingly--"single rooms" and "light housekeeping apartments." A total of 92 percent of the respondents who made a choice preferred either single rooms or apartments. Cubicles were chosen by only 1 percent and open dormitories were suggested by 5 percent.

A surprising aspect of the above question, however, was that of the 42 percent who indicated they would like to have a light housekeeping place, all but a very small fraction insisted they wanted to have sole occupancy. (This was interpreted to be, "a room with cooking facilities.") Hence, the vast majority of homeless men want either to live alone in a single room or to live alone in a room where they can cook.

These two forms of housing were preferred over all others by the men on all Skid Rows. However, the men on West Madison and South State streets were more inclined to vote for single rooms in preference to other places, whereas the men in the South Clark-Van Buren and the North Clark areas were more disposed to prefer light housekeeping arrangements.

How much can they pay? After asking the men what kinds of housing in which they would prefer to live, they were then asked:

"If a place like that (the one chosen by the respondent) could be built so that it is modern, clean, and well run, how much a week would you be willing and able to pay to stay there?"

In tabulating the responses to this question, an attempt was made to be realistic. Where the man had no work and was a pensioner, the amount specified was the amount now allowed him by the Department of Welfare. Where the man had been working at a good job, but was now unemployed, the amount he was now paying for a hotel room was indicated, rather than some amount he insisted on stating he could pay if he had a good job. In other words, the statistics of table 3-12 not only indicate what the men say they are willing to pay, but they also indicate as reliably as possible what they actually are able to pay at the time of the interview. About 7 percent of the men (about 800-850 men) were in a position where they could pay almost nothing for a room. These men were sleeping out or trying to live off the missions. About 30 percent (3,600 men) were able to pay the \$3 to \$5 per week it now costs to stay in a cubicle. But almost 35 percent indicated they could pay between \$6 and \$8 a week, which is roughly the price at which single rooms might be made available commercially, without subsidy. Thus, roughly 4,200 men not only desire to move out of

Table 3-10: Type of Housing Desired by Homeless Men on Chicago's Skid Rows, Winter, 1958

Type of housing	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Open dormitories.....	04.9	05.1	07.7	0.0	2.3
Cubicles in men's hotels.....	01.0	01.4	0.0	0.0	...
Single rooms.....	50.2	52.6	46.8	44.0	39.7
Apartment for joint occupancy....	06.2	05.3	07.3	03.0	5.3
Single-room with cooking facilities or apartment, for sole occupancy.....	36.4	32.9	38.3	51.0	52.7
Own home.....	01.3	01.7	0.0	02.0	...

Note: The above percentages are based upon the cases for which information was obtained. No information concerning the type of housing desired obtained from 1.3 percent of the men interviewed.

Table 3-11: Opinions of Homeless Men in Chicago Concerning Who Should Manage New Housing for Residents of Skid Rows, Winter, 1958

Who should manage	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Private business men...	36.7	33.8	37.8	52.6	48.4
City of Chicago.....	49.2	49.4	53.8	34.0	49.2
Federal Government.....	1.0	1.4	...	...	...
Don't know.....	13.2	15.3	8.4	13.4	2.3

Note: The above percentages are based upon the cases for which information was obtained. No information concerning who should manage the housing was obtained from 3.2 percent of the men interviewed.

Table 3-12: Estimated Amount of Rent Per Week Homeless Men on Skid Row Are Able and Willing to Pay for Improved Housing, Winter, 1958

Rent per week	Total	West Madison Street	South State Street	North Clark Street	South Clark, Van Buren, and others
Total.....	100.0	100.0	100.0	100.0	100.0
Nothing.....	5.1	6.1	3.1	4.0	3.1
\$1-\$2.....	1.9	2.4	0.8	...	...
\$3-\$5.....	30.9	31.6	32.7	30.0	21.9
\$6.....	11.2	9.8	18.1	6.0	14.1
\$7.....	12.9	13.1	14.6	12.0	8.6
\$8.....	11.1	11.2	8.7	21.0	7.0
\$9-\$10.....	15.1	14.4	14.6	12.0	25.0
\$11-\$12.....	5.5	5.8	3.5	9.0	3.9
\$13-\$15.....	5.0	3.9	4.7	6.0	14.1
\$16-\$25.....	1.5	1.7	0.8	...	2.3

Note: The above percentages are based upon the cases for which information was obtained. No information concerning amount of rent the person could pay was obtained from 2.7 percent of the men interviewed.

cubicles into single rooms, but also apparently would be able to afford it if these rooms were available.

Moreover, a total of 27 percent reported they could pay \$9 to \$16 or more per week. This is the range at which simple, bare-minimum light housekeeping rooms might conceivably be made available commercially, without subsidy. Thus, approximately 3,250 men would be in the market for such living quarters if they were available.

Before analyzing these housing preferences further, it is necessary to study some of the problems of the men and the attitudes they have expressed toward the present Skid Row areas as a place to live. A later chapter in this report will return to these materials.

Who should manage the housing? After inquiring about the type of living accommodations desired and the amount he was able to pay, each respondent was then asked:

"Who do you think should manage these places--private businessmen or a government housing agency run by the City of Chicago?"

The answers to this question were not flattering, either to private businessmen or to the City of Chicago. In general, about one-half, when pressed, chose the City of Chicago (see table 3-11). Private businessmen were chosen by 37 percent. Even though the Federal Government was not mentioned, 1 percent insisted on specifying that the rehousing of Skid Row areas should be placed under Federal control. A total of 13 percent either expressed no preference or said they did not know.

#### SUMMARY

There are approximately 12,000 sleeping spaces in cubicle-type hotels and other men's hotels that are available for rent by residents of Skid Row. Almost all of these provide living accommodations that are below the level desired by the general public, but are accepted by homeless men either because they cannot afford better or because they do not really want better. These units vary greatly in the degree of cleanliness, freedom from vermin, and fire resistance. A substantial number and proportion have been cited by the City of Chicago for deficiencies in building conditions and fire prevention inadequacies. A disproportionately large share of these least desirable units are located in small cubicle hotels and hotels with rooms located in very old structures. There is a high vacancy rate in Skid Row hotels at the present time.

The quality of Skid Row housing in Chicago may be characterized by saying that, as nearly as can be determined, the vast majority of sleeping spaces are being operated within the specifications of the municipal fire and building codes, with the possible exception of maintenance of cleanliness and firefighting facilities. Unless there is periodic inspection and correction, there may be a tendency to let filth and trash accumulate, to fail to maintain firefighting equipment, and for employees to become lax in taking precautions against fire.

In concluding this chapter on Skid Row housing, a statement made earlier must be reemphasized. SOME OF THE HOUSING FACILITIES ON SKID ROW ARE OPERATED AT A VERY HIGH LEVEL OF CLEANLINESS, QUIET, AND SAFETY FROM FIRE. SOME OF THE CUBICLE HOTELS ARE HIGHLY FIREPROOF OR FIRE RESISTANT, HAVING BEEN DESIGNED AND BUILT AS FIREPROOF FLOPHOUSES OR WELL CONVERTED FROM FIRE RESISTANT STRUCTURES; OTHERS ARE NOT.

When asked what kinds of accommodations they desired, the residents of Skid Row voted overwhelmingly in favor of single rooms and against cubicles or dormitories. A substantial proportion indicated they would like a room with cooking facilities. About one-half of the men appear to be able to afford better housing of the type they desire if it is provided on a low-cost, minimum-profit basis.



WHO LIVES ON SKID ROW AND WHY?--VIEWS OF RESOURCE PERSONS

Skid Rows are not inhabited by a single type of person. Instead, it is possible to identify several different types of persons who reside here. Each type seems to be living here for a different combination of reasons. The study of Skid Rows had not been underway very long before these ideas came to be appreciated. Answers to the question, "Who lives on Skid Row and why?" were sought from the people who ought to know best--the persons who have worked with these men in the areas where they live, and who know their situation by first-hand observation and experience.

The first stage of the present study consisted of interviewing a selected list of "resource persons;" both in Chicago and in other cities, who have extensive first-hand experience with homeless men and the problems of Skid Row. In the course of this interview, each expert was asked the following three questions:

1. "Some people say that all the men on Skid Row are pretty much alike. How do you feel about this--do you agree or disagree? (What makes you say that?)"
2. "What are the main types or kinds of men one finds in the homeless men areas?"
3. "What brings each kind of men to the homeless men areas? For each group describe the social or economic forces which attract the men."

This chapter undertakes to enumerate the different kinds of persons which the resource persons said would be found to live on Skid Row, and to list the forces which they believe attract the men here. The experienced judgments of these long-term observers provides an invaluable backdrop against which to view the statements of the men themselves. As educated professional persons, the resource respondents were able to deal with the situation conceptually, whereas the men are much more limited in their ability to take an objective and detached point of view. Moreover, in explaining to the interviewers why they live on Skid Row, the men themselves often are not themselves aware of some of the forces that have been at work. The materials to be analyzed are the responses from 37 interviews with resource persons in Chicago and 74 resource persons in other cities, taken in the summer of 1957. In digesting these materials, an effort has been made to represent every different idea submitted by any resource person. In a field such as this, it not infrequently happens that by prolonged observation, keen insight, and concentrated reflection upon a problem, one or two persons may be "years ahead of their time," or "miles ahead of the field." Hence each different idea is reported, irrespective of whether other experts agree or disagree with it.

## PART I

## WHO LIVES ON SKID ROW?

For purposes of this chapter, the residents of Skid Row were divided into six major classes, as follows:

1. Elderly or physically disabled men
2. Resident workingmen
3. Migratory workers
4. "Bums" (beggars and panhandlers)
5. Criminals and workers in illegal enterprises
6. Chronic alcoholics

If a man could be classified in two or more different classes, he was placed in the class lowest in the list. For example, elderly men who are also "bums" and "chronic alcoholics" would be classed as "chronic alcoholics." The class of "bums" was further subdivided into two groups, "transient bums" and "resident bums." Also, the group of chronic alcoholics was subdivided into three subgroups: (a) Those that are physically rehabilitable and with no serious mental illness; (b) Those physically rehabilitable but with serious mental illness; and (c) Those unable to work and not rehabilitable. The full definition of each group is given in the first footnote.<sup>1,2</sup>

1

A CLASSIFICATION OF HOMELESS MEN

1. Elderly or physically disabled men--unable to work or retired--living on pensions, public assistance, or private aid. May drink, but are not chronic alcoholics, as defined below.
2. Semi-settled or settled workingmen--employed or employable--seeking work. Usually work at unskilled or low-paying jobs. Reside in the area rather permanently, although frequently may change residence from one hotel or rooming-house to another. May drink, but are not chronic alcoholics as defined below.
3. Migratory workers--seasonal or temporary workers on railroad gangs, farm harvest laborers, or other migratory workers who come to the city between jobs, to spend the winter, or to get a temporary job here before "moving on" to another place. May drink, but are not chronic alcoholics as defined below.
- 4a. Transient "bums"--men who just wander from one place to another, who make a living by begging and seeking help from charitable organizations in preference to work. They stay in town for only a short time. May drink, but are not chronic alcoholics as defined below.
- 4b. Resident "bums"--semi-settled or settled panhandlers or other shiftless men who are physically able to work but choose not to work. May drink, but are not chronic alcoholics as defined below.
5. Criminals and workers in illegal enterprises--professional thieves, gamblers, "pimps," confidence men, etc. May drink, but are not chronic alcoholics as defined below.
6. Chronic alcoholics--men who have passed beyond the "excessive drinking" stage and who cannot control their drinking enough to hold a job or to take care of

During the interview with the resource persons, the above classification was submitted, and the respondents were asked to (a) evaluate the classification itself and suggest new categories or to recombine the present ones to make the best possible classification, and (b) estimate the total number of men living on Skid Row that fall in each of the categories. Because the classification has been developed after several informal interviews with first-hand observers of Skid Rows and from reading published reports about Skid Row life, it is not surprising that almost all of the respondents found the classification useful, and few suggestions for change were made. One or more resource persons suggested that the following groups should be separately identified:

Runaways and adventurers--young boys who have left home because of a family quarrel or simply out to "see the world," and who have landed here without knowing exactly why. Many of these boys are merely temporarily unsettled, and with skillful counseling can be "put straight."

"Vacationers"--workingmen from other neighborhoods who are periodic drinkers, and who are on a temporary "binge." After a few days they sober up and return to their family and jobs.

Young veterans or unstable young men. Several Skid Row observers reported that since 1950-52 there has been an increase in young men, many of whom served in World War II or the Korean conflict. These young men appear to have been unable to adjust to the routine of a job, family, and community life, and have drifted from one place to another until they finally end here.

Sex perverts--

Mentally unsound persons--feeble minded or seriously psychotic men who wander or gravitate to Skid Row. Usually they are picked up rather promptly by the police, and the screening process in the courts causes them to be institutionalized.

"Normal" residents--businessmen or employees who operate or manage hotels, restaurants, or other facilities on Skid Row and live in the area. This includes many mission workers.

themselves. These men are arrested repeatedly for drunkenness or disorderly conduct and spend a sizable proportion of their time in jail or in other places for detaining drunks. The following three sub-classes of alcoholics may be recognized:

- a. Physically rehabilitable alcoholics, no serious mental illness--without major physical handicaps or poor health that would prevent working, no apparent serious mental illness;
- b. Physically rehabilitable alcoholics, mentally ill--without major physical handicaps or poor health that would prevent working, but with symptoms of mental illness;
- c. Chronic alcoholics--unable to work--elderly or physically disabled men, including derelicts with irreparable alcoholic deterioration.

<sup>2</sup> To many of the resource persons, the three-fold classification of alcoholics represented only degrees of deterioration, stages, or combinations of physical conditions at which alcoholics had arrived. Thus, the first group was interpreted as being an early stage of alcoholism and the last two as being different kinds of developments at the advanced stages, with the third being the final and ultimate stage.

At the time of the interview the resource persons were asked also to indicate the proportion of men of each type one would find on Skid Row. The replies to this question are now irrelevant, since statistics for a representative cross-section of at least one Skid Row are available. The important finding is (a) the experts overwhelmingly agreed that homeless men are not all alike but fall into different classes and (b) experts agree generally upon what the major types are.

## PART II

### WHY DOES EACH TYPE OF PERSON LIVE ON SKID ROW?

What forces bring each of the six major types of men listed above to live on Skid Row? After describing the explanations ascribed to each particular type of homeless man, a summary statement tries to arrive at a single succinct overview.

A. WHY DO ELDERLY AND PHYSICALLY DISABLED MEN LIVE ON SKID ROW?

1. Cheaper Living Accommodations Can Be Found There Than Elsewhere in the City. Rents in a Skid Row "cage" hotel are cheaper than rentals in any other type of dwelling. Prices in the restaurants are generally lower than elsewhere in the city. The person with a small, inadequate income finds that he can more nearly "make ends meet" if he lives on Skid Row than if he were to live in any other neighborhood. This applies with especially strong force to elderly pensioners--men who receive Old Age Assistance or public assistance for disability, who are receiving minimum pension benefits from Social Security, or who are retired on small pensions from private firms. The maximum normal Old Age Assistance check for an elderly person living alone is \$77 per month exclusive of medical costs. The minimum Social Security check is \$30 per month but may be supplemented by Old Age Assistance. If an elderly man lives in a cage hotel at \$5.00 per week and purchases his meals at the following rates:

Breakfast . . .	\$0.30
Lunch . . .	0.50
Dinner . . .	<u>0.80</u>
Total . . .	\$1.60

he can obtain food and shelter for \$68 - \$70 per month.

A significant number of the residents of Skid Row are pensioners receiving extremely small monthly payments; they are among those hardest hit by inflation. Many of these men are known to the Welfare Department, and are part of the regular welfare "case load." In 1956 there were 1,242 recipients of Old Age Assistance living in the area between Halsted and Western, Congress and Lake--Chicago's West Madison Street Skid Row and its immediate environs.

For many of these elderly pensioners, the week before the arrival of the pension check is a critical one. If they have been improvident, have been forced to spend their money for an illness, or have been jackrolled during the month, the missions try to help them over these days. If they attend services at a mission, they can pick up one or two free meals each day. With their room rent paid in advance, they are able to get by.

There are other economies of living that can be practiced by Skid Row residents without embarrassment. It is considered proper to wear old clothes or work clothes on the street, in public eating and drinking places, in theatres, etc. The low-income pensioner is compelled to spend less of his allotment for clothing, laundry, and dry cleaning than would otherwise be necessary. It is not really essential for him to own a change of clothes, although many do. If he were to appear

in an average neighborhood dressed in his everyday Skid Row attire, he would appear conspicuous and out of place. Poverty doesn't make its clients feel so self-conscious when their status is shared by their neighbors.

These elderly or disabled pensioners are among those hardest-hit by inflation. According to first-hand observers, many, if not most, are here of necessity, not by choice. As one respondent stated it, "These men are not attracted here; they are forced here."

### 2. Here Older Men Can Find Companionship and Relief from a Lonely Old Age.

Sociologists and psychologists have shown that loneliness and lack of companionship are hardships of old age that are perhaps as hard to bear as ill health. Several resource persons pointed out that one of Skid Row's assets, and one which would be most welcome to an elderly man, is ready companionship. Here, the experts report, it is not difficult to find friends. Men who have spent their lives as "gandy dancers" (railroad maintenance men) can meet and talk over the old days with other ex-gandy dancers. Inasmuch as a very large proportion of the older men who live here are reported to have once been unskilled workers or semiskilled operatives, they have much in common--experience with production lines, itinerant work in agriculture, shops, trucks, strikes, bosses, unions, etc. is a common ground. Many times, old folks who live in a "normal" community are ignored, left out, and isolated by the younger generation around them, with the result that, despite living in comfortable surroundings, they are most discontented. In fact, in recent years, some communities have provided special "day centers" where elderly people may congregate, socialize, and share common activities. Resource persons point out that this type of activity has long been a Skid Row institution. On Skid Row, it seems, an older man can easily find someone who has the same kind of problem that he has--or will at least listen to his problems in exchange for the privilege of relating his own problems in return. The other younger full-time residents of Skid Row may be more tolerant of old people than the average citizen.

Several of the resource persons, by placing such strong emphasis upon this aspect of Skid Row life, implied that, on balance, the poor pensioner living here in privation and well below his standard of comfort and nutrition, may be no more unhappy than many older men who live in comfort but semi-isolation from others of their age and interests.

### 3. In Many Cases Homeless Men Are Neglected Persons: No One Wants Them.

Many of the elderly or disabled men on Skid Row are widowers who have children or other relatives who could afford to give economic aid. This neglect is said to--

have several causes. Since the oldster has lost his economic usefulness, he is no longer welcomed as one of the family. The children may live in a small apartment, and taking in the father may cause inconvenience or may require moving to a place with additional room. If there are grandchildren the interference of the grandfather in child rearing may be resented. Sometimes the father, who is an uneducated workingman who has worn rough clothing and talked workingman's language all his life, is a source of embarrassment to a child who has climbed into a middle-class neighborhood. Where the elderly man is dependent upon children for support because his own income is inadequate, and where that support is not given, he must seek a low cost-of-living area, like Skid Row.

In describing this situation, several of the resource people interpreted it as an indictment of American family life. They pointed out that in many cultures the family has an obligation to care for its elderly and disabled members, but that this feeling of responsibility seems to be dying out in our culture.

4. In a Few Instances, Homeless Men Are the "Last of the Tribe." Some of the old men on Skid Row have no immediate family. They have outlived all of their brothers and sisters, their wives, and may have no children alive. There is no one to take an interest in them, to help them, or to give them a home. When this situation is coupled with low income, they have almost no alternative but to live in a place of Skid Row type.

5. Some Elderly or Disabled Homeless Men Are Social Outcasts or Unstable Persons. Several resource persons warned against the easy conclusion that every elderly man living on Skid Row is an innocent victim of callous relatives, the inexorable and merciless working of an inflated economic system, the impersonal and inflexible welfare and pension laws. Some of them were described as men who throughout their lives have been social misfits or persons in poor mental health. They may have been social rebels, social nonconformists or emotionally disturbed men who were fired from one job after another for being trouble makers, "misfits" --cantankerous--who are given to unpredictable and unwarranted temper flareups, or who have persistently challenged the organization and authority of the generally accepted social institutions. At home they may have been the party of major fault in decades of family fusses, child neglect, and abuse of other family members. They may have gambled away or drunk up a large share of their earnings, leaving their families to struggle along. Some were slovenly in their dress and personal habits. Wives who have suffered through such an experience in order to maintain a home for their children frequently desert the husband when the children

are grown. The children may feel no obligation to the father and may not want to risk their own marital happiness or the proper upbringing of their own children by taking him into their household. If they are disliked and avoided in their own neighborhood because they are guilty of years of family neglect and irresponsibility, old men who are social outcasts can find others like themselves on Skid Row, and can spend their days condemning the society that finally ceased to tolerate them--without the risk of being contradicted by evidence that they were the major transgressors of social rules.

In fairness, as some resource people point out, it must also be admitted that Skid Row is sometimes a hide-out for an elderly man who faithfully stuck by a shrewish wife and a bad family situation until the children were grown, and then marched off to enjoy a few years of freedom from domination, surrendering whatever worldly goods he possessed as a payment for this privilege.

6. Some Older Men Are Heavy Drinkers, and Have Ended Up on Skid Row for That Reason. Some of the elderly men on Skid Row are chronic alcoholics, and others have been or are very heavy drinkers. If they are pensioned or have some other fixed but assured income, one way to maximize their drinking is to live here where food and lodging take a smaller "bite" from the monthly check, where cheap liquor is readily available, and where drinking companions are plentiful. Some of these men are reported to migrate here after their retirement or after the dissolution of their families, while others are simply long-time residents of Skid Row who were heavy drinkers as workingmen and now are heavy drinkers in retirement.

7. Some Older Men Are Here Because of Employment and Other Conveniences. Convenience probably is not enough in itself to account for the presence of these older men in Skid Row neighborhoods, but it is a factor frequently mentioned as a contributing cause. In Chicago's West Madison Street area, for example, the employment offices offering "spot jobs," Cook County Hospital and several medical clinics from which medical care can be obtained free or at low cost, and the Welfare Department, are located nearby. Coupled with the other factors mentioned above, this means that less effort is required to live here than in many other neighborhoods. In addition, the center of town is only a short walk away, and the transportation system is arranged in such a way that it is easy to live here and reach any part of the city within a reasonably short time.



8. For a Few Itinerant and Other Destitute Elderly Men, Skid Row Is the Last Stop. The man who cannot work because of age or disability, who has no savings and no means of support, and who cannot fulfill the residence requirements of the state has almost no alternative but to land on Skid Row. There is no other community that is set up to care for him in the city, unless it institutionalizes him or ships him to another state where he will be almost equally unwelcome and without care. Among this group will be found many ex-migratory farm workers, railroad workers, and construction workers who drifted from one job to another. Here also will be found the few surviving hoboos, the elderly "bums" who have spent their lives begging or in other parasitic activities. There are others who, because of ignorance of the laws or loopholes in the law, do not know their welfare rights or have lost their welfare rights. On Skid Row are located the Salvation Army and the rescue missions--those organizations that "care when nobody else seems to," and it is to them that down-and-out elderly men must turn as a last resort. There are said to be men who have been injured to the point that they cannot hold a job in their old industry and cannot get a job that they can handle and that will support them, even assisted by a disability pension. This is especially true of elderly injured men, who were compensated in cash years ago for injuries incurred on the job, and have no claim for a disability pension. Others are simply men who lack Social Security coverage, and who do not qualify for Old Age Assistance or Public Assistance, and who are old or in poor health. Some of these men are fully aware that they could get help if they would agree to be institutionalized, but they are said to be too individualistic, too resentful of regime, to "go to the poor farm to die."

9. Welfare and Social Agencies Are Forced, By Circumstance, to Send Older and Disabled Men Here. All of the social agencies in the city are working on very limited budgets. The requests for their services are greater than the amounts available for aid in most cases. When deserving elderly men apply for emergency aid--a bed for the night, assistance until their pension arrangements can be completed, housing until the hospital can take them in, and in the numerous other situations where a welfare agency must act--there is no alternative but to house and feed them in the cheapest possible place--on Skid Row. For example, by giving each applicant enough money to pass the night in a Skid Row hotel and to eat in Skid Row restaurants, a charitable organization can provide assistance for approximately twice as many men as if it sent each one to the YMCA or to equivalent accommodations. Faced with the choice of serving only half their clients well or of serving almost all at a minimum level, they take the latter course. This course is forced upon welfare workers in both public and private organizations. Many an

elderly man is said to live on Skid Row because a welfare worker has gone over his budget with him, has discovered that this is the only place he can possibly be "carried" on the funds available, and has helped him get located there.

#### B. WHY DO SETTLED AND SEMI-SETTLED WORKINGMEN LIVE ON SKID ROW?

1. It Is the Employment Center for Unskilled and Daily Laborers. In Chicago, Skid Row is the manpower pool of unskilled labor. West Madison Street and vicinity are the centers for hiring men for jobs as laborers. The men call employment by the day "spot job" work; a high percentage of the workingmen on West Madison Street are "spot job" workers. Here also are found the railroad employment offices through which the "gandy dancers" are hired to be shipped out to work on railroad maintenance crews. Several commercial employment contractors are located here, and the largest of them admit that they can supply any number of men for temporary labor as truck helpers, carloaders, lumber handlers, packers, stockmen, factory laborers, and other general laborers. These contractors hire the men, keep all records, pay all insurance, handle withholding, and pay the men. The firm for which the work is done contracts for the work and pays only one labor bill-- that to the labor contractor. Numerous employment agencies located in the vicinity of Skid Row recruit men as dishwashers, janitors, handbill distributors, and other unskilled jobs that may be of longer duration. Also, the Illinois State Employment Service maintains a branch office that specializes in temporary and unskilled labor and industrial jobs. On South State Street there are similar employment opportunities to work in freight handling, restaurant, and other laborer jobs. Several large manufacturing or construction firms, and some department stores and other retail houses hire day laborers directly off the street. They arrive with a truck at 5:00 - 6:00 A.M., and men who are on the spot and ready to work are hired for the day and hauled off to the job. One of the most attractive features of "spot jobs" is that the men are paid at the end of each working day. The man who is completely broke or the man who wants to drink does not need to wait until payday on Friday. Several of the missions in all parts of the Skid Row offer job-finding assistance. The State Employment Service even keeps a man stationed at the Monroe Street Court to offer "spot jobs" to any man being released from jail. In general, on Skid Row at the present time, every able-bodied man who wants work and can work can have it--from any one of several different sources. The work available frequently is unpleasant, hard, low-paying, and/or purely temporary. Some resource people reported that a significant proportion of the men

do not want to work every day, but prefer to seek only spot work for two or three days a week in order to earn enough to pay their living expenses.

Information about new jobs and scuttlebut about old ones are reported to be principal topics of conversation on Skid Row. By living here, the unskilled workingman can keep informed about possible opportunities. Also, he can leave his bed and be on the spot where he can be hauled to work at an early morning hour with a minimum of effort.

2. For Many, It Is Almost the Only Place They Can Afford to Live. The resource persons advised that most day laborers and "spot job" workers earn \$0.75 to \$1.20 per hour (often with one or more meals "thrown in"). They do not get a job every day they apply. Many jobs do not last a whole day, but for only a few hours. Older men, disabled men, or men in poor physical condition, are picked last and often have a difficult time earning enough money to live--even when jobs are plentiful. Hence, the net pay of the man who tries to work steadily may average as little as \$20 to \$35 per week, although many workingmen make considerably more.

For such men--the older and the partially disabled workers--the same problem must be faced that confronts the pensioner: having to "get by" on a low income. Skid Row's cheap hotels and restaurants make it possible for an unskilled day laborer who is working only part time to obtain food and shelter without resorting to charity. If bad luck does come and he cannot find work, or if he decides to take a "vacation" from work, the missions will help tide him over.

One useful function of Skid Row that several resource persons mentioned is that it is the bottom rung of the ladder for many low income migrants to the Metropolis. Each year an unknown and possibly quite large number of men arrive in the city to seek work who are so nearly broke that they can afford to eat and sleep only in the cheapest places until they get established. Often they live here with money loaned or given them by charitable organizations who are assisting them in their efforts to get established. Such men may spend a week or a month on Skid Row and then move out to a better neighborhood forever. At the present time Skid Row seems to be performing this service especially often for low-income migrants from the South or from other areas with poor rural populations. For ambitious, hard working, able-bodied men for whom the life on "the stem" has no appeal, there is simply a quick in-and-out movement; they leave as quickly as they can afford something better.

3. For Some, the Social Life on Skid Row Is Attractive. The unskilled day laborer who is unmarried may have very little in common with the life of most neighborhoods in the city. He has no family interests, his occupational level is such that most of the residents would "look down" upon him, and he would feel uncomfortable. By way of contrast, many of the Skid Row hotels have lobbies or recreation rooms with a TV set, facilities for playing checkers or cards, or space for just conversing. The workingman who lives in such a place can meet and associate with others of his own job level--perhaps the friends with whom he works in the daytime. Instead of passing a lonely and semi-isolated existence in a room in a private household, he can associate freely with comrades who regard him as an equal and welcome him. If his earnings are enough he can spend some evenings in the taverns, socializing with others of similar interests and outlook. It is reported that sometimes a group of friends will form a corporation and pool their income for the use of all, so that there is greater mutual security. One's friends then become a kind of social insurance against unemployment, lack of food, etc. In many parts of the city the homeless laborer would be an unwelcome outsider because of his income, occupation and manner of dress. If he identifies himself with the Skid Row community he can feel at home and among friends. In other places he might feel conspicuous, out of place, and lonesome. Some of the resource persons familiar with life on "the street" report that to the homeless man Skid Row may appear to be a most exciting place, with a variety of activities and an attractiveness that the outsider may not easily perceive.

Those who pointed out this aspect of Skid Row did not claim that this was the only neighborhood in the city where an unmarried laborer could live happily or that all laborers were attracted to the social life of Skid Row. They did want it understood, however, that not a few of the workingmen who live here do so not only to be near the source of jobs and because it is cheap--but also because they like it. Here they are said to "feel comfortable," with respect to matters of dress, income, recreation, interests, and topics of conversation.

4. Some Workingmen Like to Live Here Because of Drinking. For some unattached workingmen, drinking is a major pastime and recreation. Such men want to spend a part of almost every evening drinking, either in the taverns or in a hotel room. They may be moderate or heavy drinkers who work quite steadily and who seldom are arrested for being drunk. Undoubtedly many of these perennial drinkers eventually become chronic alcoholics. Several of the resource persons reported their impression that some of the workingmen preferred to live here where they could be close to drinking companions, where congenial taverns welcomed them even

though they are dressed in working clothes, and where they could spend a minimum amount of income on food and shelter in order to increase the amount of money available for drinking. Exactly how many men derive so much enjoyment from drinking, or feel so impelled to drink in such a steady, but still semi-controlled fashion that they organize their entire life around it, is not known.

5. Some Workingmen Are Psychological and Social Misfits Who Are Here Because They Are Trying to Escape "Normal" Society. A certain proportion of workingmen has left their home communities for personal reasons and settled here in order to get away from social situations which they found intolerable or as a substitute for living in a desirable situation from which they have been expelled. Family trouble, a major disappointment or sorrow, acute maladjustment to a given job, or other responsibility, and other psychological and personal problems may produce the unsettled condition in which they find themselves. Many times these are younger persons. Not infrequently persons in such a plight want to go where they cannot easily be found, or where they can be anonymous and no one will ask questions or quiz them about their past successes or failures. Skid Row is reported to be a place where a man can keep his business to himself if he chooses, and where relationships between people are friendly but casual. If there is an incentive to drink because of maladjustment as well as to sever old social ties, Skid Row may prove to be a double attraction.

6. Some Workingmen May Live Here Because of a Low Standard of Living and Lack of Ambition to Live Any Other Way. Because of the kind of family upbringing they had, some men may have no desire to "get ahead" or to accomplish a job well in order to increase their income and level of living. Such men may come from homes where the level of life was crude and rough and where they had little chance to learn or appreciate how other folks live. It is said that many Skid Row men were reared in "backwoods" communities where they became acquainted with heavy and rather steady drinking early in their childhood, and the Skid Row life may not seem to them to be so poor and uncomfortable as it does to others who have known better days. The resource persons who mentioned this pointed out that while every homeless man has had a home at some time, the kind of home it was and the level of life to which it caused him to aspire may vary from a very low to a very high level, and that many of the men here appear to have come from family situations that inspired them to very little achievement and reconciled them to a low level of existence.

### C. WHY DO MIGRATORY WORKERS LIVE ON SKID ROW?

1. When He First Lands in Town, Many an Itinerant Worker Is in Urgent Need of Services That Only Skid Row Provides Easily. The transient laborer often is in a very sad state, both physically and economically--usually unbathed, with clothes dirty from prolonged traveling without a chance to wash. Also he needs a haircut, and may have several days' growth of beard on his face. Sometimes his clothing is so worn and torn that it will not withstand a washing. He may be financially "broke" and badly in need of a job that will pay wages immediately. In fact he may be so completely indigent that he has neither money for his next meal nor a place to stay for the night. Not infrequently he is ill and needs immediate medical attention which he cannot afford. By walking into the Social Welfare Department of the Monroe Street Court, the Salvation Army, or one of the other large missions with a staff organized to meet these needs, such a person can get immediate help toward reestablishing himself. This is especially true if he shows evidence of being a genuine workman who is in temporary need, and not merely a professional beggar. Several resource persons suggested that the newly arrived migrant worker would be viewed with suspicion and perhaps held for questioning in any other community, but on Skid Row his needs are understood and help is offered. The following quotation from one respondent who regularly gives away garments to traveling workers, illustrates the point.

"They are terribly embarrassed. They want to get clothes which do not spell out their condition. Actually, they do not fit into a better neighborhood--their clothing is so terrible."

2. Living Is Cheaper. Because his work is irregular and low-paid, the itinerant worker must stay in places where food and lodging cost little. Even if he were not in the dire straits described above, when he arrives in the city, he would still be attracted to Skid Row hotels and restaurants because of their lower prices.

3. Skid Row Is the Employment Center for Migratory Workers. Near here are located the railroad employment offices and other employment offices that will hire them and ship them out to jobs all over the country. Since railroad, construction, agricultural, and other work is seasonal, the flow of migratory workmen arriving on Skid Row fluctuates. In the late winter and early spring they begin to arrive in great numbers from their winter homes. They live in the Skid Row hotels where they can minimize expenses and be readily available when their turn to be called up comes around. There is a mutual adjustment here. Employers know that

here they can get workmen who are willing to be shipped out, and the men who are willing know when to come here to get hired.

4. Skid Row Is the Communication Center for Migratory Workers. Equally as important as employment is the information that flows along "the stem" by word of mouth. Many men are simply in transit to a particular place to look for work, and by conversing with men who have recently been there they can get information about jobs, working conditions, and pay. Tipoffs on the towns where the judge is giving stiff sentences for vagrancy or drunkenness, new devices that have been invented for making it difficult to travel by freight train or by hitchhiking, and the best ways of getting to the desired destination can be had in the bars, in hotel lobbies, and in sidewalk conversations. If a man does not have a job, and does not necessarily want to get hired or cannot get hired by one of the local agencies, he can get leads on where to migrate next.

5. Skid Row Has a Nationwide Reputation for Welcoming Strangers Who Are Workingmen. The migratory workman who arrives in the city as a stranger probably has been told many times that he need not be a stranger long on Skid Row--that there he will be received with real friendliness and tolerance. It has a reputation for being "the place to stay" when in Chicago. As one resource person put it, "It is touted from coast to coast as a street to make." Here he will find other migratory workmen of like interests, income, occupation, and philosophy. His poor dress, his lack of money, his line of work are accepted as normal here, and he would not "stick out like a sore thumb" (to quote the figure of speech used by some resource people) as he would in many other communities in the city. Some of the resource informants reported that Chicago's reputation in this respect is so good that migratory workingmen in transit often would stop over for a few days or a couple of weeks as a sort of "vacation" before traveling on, and that many workingmen being released from a seasonal job someplace in the hinterland beat their way to Chicago for a few weeks of living on Skid Row before going to their winter homes or other destinations. In describing this situation, it was pointed out that there are taverns, cheap hotels, and other facilities attractive to unmarried workingmen in almost any smaller city, but that there the stranger in town is viewed as an outsider and given very little friendliness. For this reason, the wandering worker, "the man without a home," is said to find the nearest equivalent to community feeling, companionship, and a sense of belonging to society, on the Skid Rows of the largest cities.

6. Some Migratory Workers Want and Need the Tolerance and Anonymity That Skid Row Provides. Usually the migratory worker is footloose for very specific reasons. Many times these reasons are highly commendable, such as a search for better paying and more satisfactory employment than is available at home. At other times, the migratory worker is said to be a restless social misfit who uses Skid Row as a hiding place to avoid normal community contacts and responsibilities. He may be running away from something--a wife, parents, or other responsibility. He even may be trying to evade the police. Several resource persons stated that a considerable number of men with a "wanderlust" were started on their career of wandering by public censure for acts committed in their home communities. They also claimed that flights of this kind are often accompanied by intense feelings of self-disgust and loss of self-respect, so that to them their past is painful and something to be forgotten.

The Skid Row community is well known for its tolerance and unconcern about a man's past. The newcomer can tell as much or as little about himself as he chooses. If a man becomes indiscreet and tells too much to his drinking companions, there is little danger of his whereabouts being reported to the police or to the welfare department in another city that may want him for non-support or some other reason. Not infrequently the self-hatred that comes with flight is said to be accompanied by efforts to blot out the past by heavy drinking. Skid Row is equipped not only to provide the runaway with the tolerance and anonymity he desires, but also with the means whereby he may continue to avoid facing up to his problems.

#### D. WHY DO TRANSIENT "BUMS" LIVE ON SKID ROW?

(As mentioned earlier, the word "bum"--to which many resource persons objected--is used in this report to refer to a man who is able to perform useful work but who makes a living by begging or trying to "work" the missions and welfare agencies.) The transient bum is almost a perennial wanderer, a vagabond. When such men arrive in a city they are said to head directly for the Skid Row section, and to use it as their base of operations while in that town. To the migrant bum, Skid Row offers all of the attractions it holds for the migratory worker (see Part II-C, above). It is especially useful to him as a communication center, as discussed in II-C, but it offers some additional advantages to the transient bum.

##### 1. It Offers the Maximum Opportunity to Get By With a Minimum of Work.

One resource person said that the chief factor bringing these men to Skid Row is:



"...Laziness--complete lack of social responsibility. They have absolutely no personal pride. It is the one area in the city that has the most agencies ready to help. All they want to do is to be helped. I consider them the lowest form in the area. They just go from one welfare agency to another. They are a non-complaining lot. They come here to take advantage of charity."

Unless Skid Row is unusually crowded, the charitable agencies will find a place for a transient to sleep, and will give him a meal for at least one night--be he bum or traveling worker. In fact, if there is a shortage of beds, the strange bum often is given priority over the "home guard" (resident) bum. Skid Row, the central business district, and certain main thoroughfares, are the only places in the metropolis the bum can successfully ply his trade. If he tries door-to-door begging as he does in small towns or in the country, householders call the police.

The missions are fully aware that bums often attend services solely for the purpose of getting a meal or a bed, and that some will "take a nose dive" (publicly fake a conversion) in order to get preferential treatment. Nevertheless, they tolerate this hypocrisy on the grounds that at least they are helping creatures in need. Sociologists have pointed out that this mission activity performs a very useful service to the community by controlling the professional beggar. It helps keep him localized in one area and satisfies him to the point that he is not inclined to undertake more predatory types of activity directed toward getting something for nothing. It helps keep his attention focused upon a few spots where the police can keep him under surveillance, and where facilities and opportunities for changing his way of life are always being presented before him. The price the bum must pay for his meal or bed is to be reminded that he is living outside the socially prescribed pattern.

2. They Can Get Help from Other Bums. Bums are said to form mutual assistance corporations in which they pool their resources. When one man has money or food he shares it with his buddies, so that he may be taken care of when he is down. Bums are not the only ones on Skid Row who form mutual security corporations, but they are reported to be among the most active participants in such informal organizations. They are also among the most inclined groups to form a "bottle gang" (a group of men who pool a few cents each to buy a bottle, which they pass around until the liquor is gone). Bums also share information about travel conditions, places to make an easy touch, and other things that are useful to itinerants who do not pay their way.

To the transient bum with little money, Skid Row provides a maximum of quick security. By starting with the generosity of the missions and combining it with the security of membership in a mutual security corporation of fellow bums he is able to establish himself quickly. Skid Row is the best one-stop place for him to get a bed, get a meal, and find a cheap bottle.

Many bums are said to try to beg from, or act as parasites on other down-and-outers or poor pensioners as a completely selfish activity, without thought or intention of repayment or of mutual aid.

3. Some Bums Expect and Want Nothing Better Than Skid Row Conditions.

Vagabonds who travel by freight train or by hitchhiking rides on trucks--sleeping in the open, cooking over campfires, rummaging through waste cans for food--are reported to look upon the living conditions on Skid Row as acceptably good, or even luxurious. To such a bum, a sojourn in a Skid Row flophouse, meals in the cheap restaurants, and participating in the social life along "the stem" is living in comparative comfort and luxury.

4. They Have Least Trouble with the Police Here. The transient bum can count on having less trouble with the police if he stays on Skid Row and its fringes than if he wanders into middle-class residential neighborhoods. On Skid Row he is not only tolerated, but his dress, his manner of living, and his activities blend more harmoniously with the environment than would be the case elsewhere. His desire to remain anonymous--especially so far as the police are concerned--is respected here, both in thought and deed. Here there is probably less threat of being booked for vagrancy, loitering, or disturbing the peace than in other neighborhoods.

5. Bums Are Social Outcasts Who Are Welcome Nowhere Else or Anti-social Rebels Who Feel at Home Nowhere Else. The transient bum is either a social outcast or a social nonconformist in almost every respect. In his minimization of work, in his lack of residential stability, in his failure to assume community and family responsibilities, etc., he does not conform. He is looked upon with intolerance, disgust, and fear by residents of other neighborhoods. If he receives help, often it is given simply to pacify him and hurry him on his way, rather than as an honest gesture of goodwill. Skid Row extends perhaps the only expressions of respect, personal appreciation, companionship and tolerance the bum ever experiences outside the hobo "jungles" or camps along the railroads. For this reason,

the social life, the evenings spent in taverns or with bottle gangs, the mob scenes along the street, may be the brightest memories of the transient bum, because they are warm spots in an otherwise rather a-social if not anti-social existence. If he ever does change his way and become a more social and conventional member of society, it probably will be through the mediation of metropolitan Skid Row institutions rather than because of any treatment given him by the hinterland society.

#### E. WHY DO RESIDENT BUMS LIVE ON SKID ROW?

For the same reasons that it is a good place of residence for transient bums, Skid Row is a favorable habitat for the permanent residence of bums. Also, the same factors that were described for the settled or semi-settled workingman exert their force to make this area an attractive place for settled or semi-settled bums. However, there are some additional reasons why the resident bum chooses this as his neighborhood.

1. In Many Cases the Resident Bum Is Simply a Transient Bum Who Has Settled Down. After a certain amount of traveling, the bum has had a chance to "shop and compare." A certain proportion decide that Chicago (or one of the other cities from which reports were received) is the best place for them in the long run. One resource person emphasized this point by saying, "A bum chooses the city that is best for him. This city has been quite kind to him and he stays."

2. In a Few Cases He Is Able to Become a Semi-permanent Beneficiary of Charity. By remaining in the state long enough to qualify as a resident and by skillful and consistent use of lies and deceit, some bums are able to get on public assistance and to stay there for a considerable length of time, although they are not deserving and do not qualify honestly. They know how to avoid or delay having to accept work that is offered them by the Welfare Departments without having their payments stopped. Despite a program of continuous vigilance and investigation by welfare agencies, they manage to find or create loopholes and get relief checks, disability checks, and unemployment checks to which they are not morally or legally entitled. During the time he is working such a racket, the bum becomes a settled citizen of Skid Row.

3. Skid Row Usually Is Highly Accessible to the Central Business District, the Railroad Stations, and Other Places Favorable for Panhandling or Begging. Most cities have rigid laws against panhandling and begging. The police will pick up the man who begs openly or who stays in one spot. But skillful beggars are

supposed to know how to panhandle in a manner that causes little attention and that keeps them out of the watchful eye of the police. The Skid Row is a convenient home port from which to make begging forays, and to which to return at night.

4. Skid Row Is a Good Address for a Bum in Trouble. If a beggar is picked up for panhandling, one of his favorite alibies is supposed to be that he had been drinking and did not know what he was doing. If he lists a Skid Row flophouse as an address, his story sounds more plausible to the judge. If a beggar were making a comfortable living and were to display it by living in a good apartment in another part of the city, his acts would probably cause greater resentment and invite a greater punishment if arrested than if he minimized his apparent income and lived the life of a Skid Row bum.

5. Some Bums Are Homosexual, and Earn a Part of Their Livelihood As Such. People with perverted sex tendencies are said to be scattered throughout all social strata of the city. Some of them are homosexuals who have good jobs, money, and social positions. Skid Row, it was reported, offers them one safe way to pursue their sex life in comparative safety, and some bums (usually younger men) on the Skid Row are said to accept pay for participating. Also, bums who are homosexuals tend to stay in the neighborhood because homosexuality is tolerated here more than in other neighborhoods.

However, homosexuality is not monopolized by resident bums, even on Skid Row. It is said that many transient bums and resident workingmen are also similarly afflicted. For some of these other groups, homosexuality is simply a means of expression which Skid Row permits, whereas for some bums it is a partial source of livelihood.

6. This Is the Place Where Bums Are Abused Least. The bum is tolerated less than almost any other type of person on Skid Row, except the jackroller. But even here he is given better treatment than he would get in most other neighborhoods. The police leave him alone; he is not rejected so completely by his fellow men; he finds others of his kind to form mutual assistance corporations; and he is close to the institutions that will befriend him and grant some of his wishes. Hence, he gets less personal abuse and lives in greater security here than he could elsewhere.

7. The Bum Is Sometimes an Ex-alcoholic. Many or most bums are heavy drinkers, but some are said to be alcoholics who "hit the bottom," and came back. They may be too old, too weakened, or too dull to hold a job, and survive from

begging and working the missions. There is a class of bum called the "mission stiff" who feigns religious conversion and becomes a more or less permanent part of a mission's staff or activities in order to establish a solid claim to food and lodging. This requires abstaining from drinking--at least during the sojourn in the mission, and may last for only a few days or several months.

F. WHY DO CRIMINALS AND WORKERS IN ILLEGAL ENTERPRISES LIVE ON SKID ROW?

The resource persons painted a much more variegated picture of the activities of criminals along the Skid Rows of their cities than they did for most of the other groups of men. The following composite picture probably applies fully to no one city, and also fails to include some aspects of the Skid Rows of particular cities that were thought to be due to special circumstances rather than to the Skid Row environment as such.

1. Jackrollers and Pickpockets Find Easy Victims Here. Because a high proportion of the full-time residents of Skid Row are elderly men or heavy drinkers, they are easy prey for jackrollers. The typical jackroller is a younger man who will lead or drag his victim into an alley or darkened doorway to rob him--frequently administering an unnecessary and brutal kicking and beating in the process. It is quite common for the victim of the jackroller to lose teeth as well as money, and for him to require hospitalization to treat broken ribs, and other bones, a gashed face or other injuries. Some of the unsolved murders along Skid Row are simply cases of jackrolling where a blow over the head with a bottle or some other brutality killed the victim. One resource person said of the jackroller, "The viciousness of these men is unbelievable. They are man at his lowest--exploiting the poorest creatures this community has."

The pickpocket is also reported to use Skid Row as a hangout--sometimes locating in taverns where he can lift the wallets of customers who have become partially intoxicated.

Often these criminals act according to carefully laid plans, based on a thorough study of the habits of the men they rob. They know when pension checks are due for particular men, or when men who frequent particular taverns are paid, and arrange to waylay them. Many resource people commented on the prevalence and frequency of this type of crime along Skid Row. Such expressions as "cheap cowards," "vicious men," "preying on the helpless," were used often to describe this type of criminal or his activities. Jackrollers are said to be so merciless that they will remove the shoes and clothing of a drunken man lying on the street in

freezing weather, in order to sell them at a used clothing store.

It was reported that it is very difficult to obtain legal evidence that a man is a jackroller. The criminal may be simply a bum who mixes with his cronies until they become inebriated while he remains sober, and then maneuvers the one with the most money and the least resistance into an alley to do his work. There usually is no witness. Even if the victim recognizes his assailant, he often does not identify him at the police station or refuses to press charges because of the fear of a terrible beating later.

Jackrollers and pickpockets also prey on visitors to Skid Row. Skid Rows are adventure lands for some working men and even for "white collar" workers who live in other neighborhoods, who occasionally come here for an evening of drinking on a week-end or payday. If there is a large conference or convention in the city, almost inevitably one or more participants will lose a wallet after having gone to Skid Row for an adventure.

One of the most serious financial problems the old pensioner and working-man on Skid Row has is simply that of cashing their checks in privacy and protecting their small funds from thieves. The old man in the flophouse who leaves his door open while he goes to the toilet or who falls asleep in his chair while he watches TV in the flophouse lobby may lose his month's sustenance to the jackroller, or his clothes or shoes. If such a thing occurs in the depths of winter it can lead to death. The jackroller's victim left without funds loses his room and is forced to sleep on floors in missions, underneath bridges, or in parked trucks or boxcars. He is able to get only a meagre meal of soup and bread at a mission once or twice a day. Under these circumstances he can become seriously ill and die. It is fear of the jackroller that causes older men on Skid Row to avoid conversations with younger men. It also helps explain why the person who drinks sparingly or stays sober in the taverns may be looked upon with suspicion.

2. Skid Row Is a Good Place to Hide from the Police. Unless he is exceptionally "hot" and the police are making an all-out effort to apprehend him, Skid Row is a very good place for a criminal to "get lost" temporarily. Skid Rowers do not ask questions and they do not talk much to the police. The criminal hiding out finds all of his necessities (food, lodging, recreation, rendezvous with friends) provided without having to venture into dangerous territory. Since new faces are always arriving, the appearance on Skid Row of a stranger who is running from the police creates no comment and arouses no suspicions. Many men on the street are unshaven and need haircuts, so that by neglecting his beard a criminal

can alter his usual appearance a great deal without looking bizarre. High density and sheer numbers of men make it easy to hide. On Skid Row a criminal can register under any name and be accepted. If he were to rent a room in a residential area he probably would be noted by and would need to explain himself to a landlady, the other roomers, and possibly even some neighbors and friends of the other lodgers. The criminal who is short of cash welcomes the cheap living conditions on Skid Row, and can even take spot jobs to keep going.

However, it is reported that usually it is only petty criminals who flee to Skid Row to hide out or who live on Skid Row and use it as a regular base of operations. The major criminals seem to find Skid Row too uncomfortable and too disagreeable. One resource person said, "No self-respecting criminal is losing time here," and another reported that it is the "unsuccessful criminal" who hides here.

3. Skid Rows Are Said to Be the Bases of Operations for Certain Petty Rackets and Other Illegal Enterprises. Although Skid Row habitues are too poor to be regular dope addicts, gamblers, or patrons of high class places of prostitution, it is reported that they have their own modest requirements for these activities. Dope peddlers sell "goof balls," a cheap narcotic that costs only a quarter or half a dollar. "Making policy" and "numbers" for about the same amounts, arranging for making small bets on horse races are reported to be a regular part of Skid Row in many cities. Negroes and Puerto Ricans are said to be especially good customers of lotteries, policy, and numbers rackets. Some prostitution is also said to exist, but to be of a very cheap variety. Because prolonged use of alcohol lessens the sex appetite, because many of the men are older, and because so many of the men are too poor to afford prostitution as it is practiced in most cities, there is little economic incentive to have organized prostitution to serve the Skid Row "market." However, in some cities, Skid Row or its immediate fringes provides a tolerant site for a "red light district" whose customers live throughout the city.

The petty rackets that are devised especially for the convenience of the Skid Row men may have an extremely serious effect. They drain off precious quarters and dollars that should be spent either on food or lodging to stay alive and well.

Because Skid Row has no "moral sense"--no social organization of citizens who would resist the infiltration of crime--in some cities it is a suitable location for larger criminal operations, the operators living in other areas. With

no citizen participation in law enforcement (and often passive or active resistance from Skid Row residents) the control of crime is entirely a matter of police enforcement. In view of this situation, it may be surprising that criminals are reported as being so small a fraction of the Skid Row population.

#### G. WHY DO CHRONIC ALCOHOLICS LIVE ON SKID ROW?

As has previously been noted, this study tries to differentiate three major phases or types of chronic alcoholism. Most of the resource persons, however, preferred to discuss the problem of alcoholism in general and then to add supplementary comments about mental health in relation to alcoholism. Their preference in this respect is reflected in the following presentation of their ideas.

##### a. Factors Applicable to All Alcoholics

1. The Alcoholism of Skid Row Is Not Different from Alcoholism in General, and Skid Row Alcoholics Are Not on Skid Row Because They Are Afflicted with a Special Kind of Alcoholism. In discussing the problem of chronic alcoholism on Skid Row, many resource persons emphasized that alcoholism is prevalent among all strata of society and that the Skid Row alcoholic is not an alcoholic with different symptoms or different underlying factors, but is either 1) an alcoholic with a lower level of income, a work history of unskilled or semi-skilled labor, and the social background of a workingman, or 2) an alcoholic from any stratum of society who is in the most advanced stages of drinking without a family or other sponsor to care for him and "keep him off the bottom." Thus, there is rather widespread claim that alcoholics do not come to Skid Row because they are a unique kind of alcoholic, but because as alcoholics they are presented in other areas with a total social and economic situation in which they cannot survive. The reasons for their being here are therefore economic and social rather than medical or psychological.

2. Skid Row Alcoholics Usually Could Not Afford to Live Elsewhere. All but a very few of the chronic alcoholics who live on Skid Row are "down and out" financially. They live from week-to-week, day-to-day, or even meal-to-meal. Their drinking has progressed to a point where they can command only the poorest jobs, and they cannot hold a given job more than a few days because of failure to report for work or drinking on the job. Older retired men who are chronic alcoholics must purchase liquor from the meagre pension checks they receive. The cheap lodging, cheap food, and cheap liquor of Skid Row provide the only situation in the metropolis where the low income chronic alcoholic can subsist and continue to



drink. Many resource persons pointed out this fact that "landing on Skid Row" has a strong economic element. The chronic alcoholic with an adequate and assured income or assured care has a choice of places to go, but the low income chronic alcoholic who must support himself has no alternative economic choice. He must either gravitate to Skid Row or give up drinking. Stated in another way, a high proportion of the chronic alcoholics on Skid Row have relinquished all the occupational and professional skills and earning power they may once have had because of their inability to regulate their drinking.

3. These Men Have Been Rejected by "Normal" Society. Many of the chronic alcoholics who arrive on Skid Row leave behind a family and a community that no longer cares. After repeated episodes of drunkenness in which the family is embarrassed, robbed of essential income, subjected to the humility of pity by friends and neighbors, and other indignities, the family of the chronic alcoholic may give up in despair. For the family, each of the episodes of drunkenness probably creates the rather unsavory task of caring for the man during the stage of stupor and physical illness, the necessity of nursing him through the hangover stage, of sharing his feelings of remorse and self-hatred that culminate in new plans to stop drinking (all of which end in failure). Finally, as the episodes become more and more frequent, disgusting and emotionally taxing, the family may just give up. Their sympathy may turn to revulsion and resentment.

If the man holds a steady job, at some stage of his drinking he is fired and thrown on the labor market. He goes from job to job, gradually descending the occupational and wage ladder. As his drinking gets worse and worse, employers cease to recommend him or to excuse his drinking, and fewer bosses are willing to give him "one more chance." Finally, he is unable to obtain employment that is even remotely connected with his initial skilled occupation. These events usually are paralleled by a loss of respect and esteem by nonalcoholic friends and acquaintances, so that finally the person is written off as a "hopeless case." Even the neighborhood taverns and bars where the man has purchased his drinks may refuse to serve him because his behavior offends other patrons and his presence hurts their business. Once the stage of total rejection is reached the chronic alcoholic can make no satisfactory social adjustment in a "normal" neighborhood. The only kinds of social interaction he can elicit from others are ones of pity, disgust, fear, condescension, or formal coldness. Social workers trying to help a Skid Row alcoholic by contacting his family not infrequently are told that the family has no interest in the person and does not want to help--the bridges have all been burned and the rejection is complete.

4. Many of These Men Have Withdrawn from Society and Are Seeking to Escape from Reality. As the chronic alcoholic loses his fight with drinking, he is not unaware of the troubles he is creating or of his changed social position; yet he seems to be powerless to alter his course. In many cases his separation from family and community and his flight to Skid Row are precipitated not by an outright rejection, but by a voluntary withdrawal from society and an effort to flee from his problems. He may feel that he has brought such shame and disgrace upon his family that by banishing himself to Skid Row he will permit them to forget him and resume a happier life. Sometimes this is accompanied by a conscious or unconscious program of self-punishment: by going to Skid Row the alcoholic sentences himself to a justly deserved punishment. (Some resource persons observed that after a few weeks on Skid Row these self-punishers sometimes wander back into their homes in a most disreputable condition in order to show the family how thoroughly they are atoning for their wrongs.)

Sometimes this withdrawal is hastened by the treatment of the community. The alcoholic may feel that the entire world is critical of him, and that by coming to Skid Row he can end this critical reaction. Resource persons stated that some alcoholics have told them that they were unable to tolerate the excessive kindness, the sympathy and pity, and the polite tolerance of them as sick persons that were expressed by friends and neighbors. All this leads to an urge to flee--to get away from people who know them and the things they have done. Some of the alcoholics on Skid Row are men who are disfigured by nature or accidents, so that they are ugly, misshapen, or handicapped. Many of them have become discouraged at the discrimination and avoidance reactions they receive from the public, and have retreated to Skid Row where physical appearance is secondary in importance, and where they can drink to ease their problems.

Once on Skid Row the alcoholic may continue his flight from reality by drowning his problems in drinking. This only causes the "merry-go-round of alcoholism" to go faster: the more he drinks the more problems he creates that make him drink harder, which creates more problems, etc. It becomes harder to get even "spot jobs," and his health begins to deteriorate. As his situation appears more and more hopeless, it becomes a very painful experience for the chronic alcoholic to be sober and face the problems of living. "Drinking to forget" and to escape the real world is said to be a major reason for drinking on Skid Row--eventually if not at the outset.

5. Skid Row Provides the Chronic Alcoholic with the Tolerance, Acceptance, and Consideration He Can No Longer Get from the Larger Community. On Skid Row the chronic alcoholic finds that his situation is shared by a very large segment of the population. Instead of standing out as the deviant and undesirable character, he is able to mingle inconspicuously and compatibly with others like himself. There are no group pressures to discourage his drinking, to make him feel guilty, or to remind him that he has fled from reality. He is not singled out for criticism, pity, or other special attention; he is able to achieve the anonymity he seeks in a congenial atmosphere. In the taverns he is given service, and he can drink when it pleases him without being disturbed. The police do not pick him up unless he is so drunk that he is unable to care for himself or protect himself from jackrollers, or unless he is breaking the law by loitering with a bottle gang. On all sides there is an understanding, a tolerance, and an appreciation of life as seen by the alcoholic. The alcoholic is accepted as a respectable person, without moral condemnation. He is not "looked down on" by his fellows, and he is able to enjoy the companionship of others of similar habits.

Skid Row alcoholics are said to look out for each other, and to form friendships and mutual aid associations such as those described above for "bums." Partners in these groups will share a bottle with other members who have none; they will watch out for those who are drunk in order to keep them from being picked up by the police or falling prey to the jackroller. They tell each other their troubles, and give each other sympathy and moral justification for their past. In short, on Skid Row they find the fellowship, social participation, and good will that no other community will extend to them.

6. Skid Row Is the Last Hope of the Down and Out Alcoholic. The alcoholic who has spent the goodwill of family, employers, friends, and the community at large has only one hope left for survival and eventual rehabilitation--Skid Row. He has no money with which to pay for treatments at a clinic to relieve his alcoholism. He may have pawned everything of value he owns at a Skid Row pawn shop. He may be so weakened by drinking and malnutrition that he can no longer get or hold enough spot jobs to earn his living. Even under these conditions he can continue to "get by" on Skid Row, after a fashion. He can eat (and probably sleep) at a mission without charge, or for a very small fee, and can beg drinks from the workingmen in the taverns and in the hotels. Instead of liquor he may drink industrial alcohol, canned heat, or any one of several other harmful but intoxicating substitutes.

Although the life of an alcoholic with zero income is a very miserable existence, on Skid Row it is possible to survive under these conditions--at least temporarily. In fact, this is the situation into which most chronic alcoholics descend just before death overtakes them. As one resource person said, "There is only one place left after Skid Row--the river."

The Skid Row missions that continue to feed, clothe, and house these men are continuously offering them the opportunity to try to rehabilitate themselves. Thus, as our society is now constituted, the facilities of Skid Row are not only the chronic alcoholic's last means of livelihood; they are also his last chance to recover. Not a few of the ex-alcoholics from Skid Row made their comeback after having been picked up from the street and taken to the charity ward of the hospital or to a mission, and nursed back to health, then counseled and rehabilitated under the guidance and sponsorship of these institutions.

7. Some of the Men on Skid Row Are Here to Get Help to Control Their Drinking. The Salvation Army and each of several other of the missions on Skid Row have programs for alcoholics. This involves counseling, medical treatment, assistance in obtaining permanent work, in addition to religious instruction. Alcoholics Anonymous has chapters that meet in the vicinity of Skid Row, and Skid Row alcoholics are welcome at the meetings. Some alcoholics who want to control their drinking but who have been unsuccessful, voluntarily come to Skid Row and seek the help of one of these agencies. Such persons do not "live the life" of Skid Row, but are more or less secluded in one of the missions. The number of "white collar" alcoholics on Skid Row is not numerous, but quite a few of the ones that do arrive here come actively seeking help rather than with the intention of furthering their career as an alcoholic. It is reported to be a common belief among the men on the street that the mission programs can do as much to cure alcoholism as any one of the medical or other programs carried out by alcoholism clinics. Most alcoholics are said to possess knowledge of cures effected by the missions and the stream of voluntary commitments is fed by the reputation the missions have developed.

b. Special Factors Applicable To Alcoholics That Are Physically Rehabilitable But With Serious Mental Illness.

1. Some Alcoholics on Skid Row Are Psychotics Who Have Escaped Here from Normal Society. Because the community is tolerant, generous, and places no pressure upon the person, it is possible for a psychotic individual to "get by" on Skid

Row while suffering from mental illnesses that would soon result in complete breakdown in normal society. More or less steady drinking is a mechanism by which many of these persons relieve tensions and avoid letting their personality problems drive them into more extreme forms of behavior. On Skid Row their inadequacies are not revealed or forced upon them, so that they feel much less threatened than they would otherwise. It is doubtful that these persons are here because they are psychotic; it is more probable that alcoholism combined with serious mental illness causes a more rapid descent and a more complete loss of family and other contacts, so that many such cases gravitate to Skid Row by the processes described above.

2. Prolonged Drinking May Result in Deterioration of the Central Nervous System, and Many Skid Row Habitues Arrive Here As a Direct Consequence of Such Deterioration. None of the resource persons reported a belief that alcoholism as such caused psychoses--at least none of the regular types of mental illness such as schizophrenia, etc. But several did state that they believed prolonged drinking tended to lead to deterioration of the central nervous system.

Speech may become incoherent, there may be blindness, or a loss of reasoning powers. In reporting these opinions, it was often stated that it was difficult to declare whether these changes were the direct consequences of alcohol or the indirect consequences of malnutrition, vitamin deficiency, and general failure of physical health.

Whatever the origin of this deterioration, it was evident to some observers that the arrival of some alcoholics on Skid Row is related to this deterioration. It may be an important factor in their loss of a job or loss of social contact which leads to departure from the home community and resettlement on Skid Row. This type of deterioration may induce the migratory worker who has been a heavy drinker to settle permanently on some Skid Row.

## SUMMARY AND SYNTHESIS

From the preceding discussion it is evident that there is much overlapping from one type of homeless man to another in the reasons that bring the various types to Skid Row. Table 2 is a complete classification of all the reasons given for any group being on Skid Row, with an indication of the groups of homeless men to which each reason applies. Ignoring the reasons pertaining to the small group of criminals, it is discovered that there are eleven types of reasons for living on Skid Row that affect all groups of homeless men. These are:

1. Cheap lodging and food
2. Employment opportunities for laborers
3. Tolerance for deviant and unusual persons
4. Rejection by other communities as a social outcast
5. Withdrawal from society as a social misfit
6. Companionship and association with others of same group
7. Welfare activities of missions and other agencies
8. Opportunities and facilities for unlimited and cheap drinking
9. Secondary importance of dress and physical appearance
10. Low standards of living--men aspire to nothing better
11. Tolerance of homosexuals

These are the "common denominator" of Skid Row.

In addition, each of the groups has one or more special reasons not shared by all other groups. (See "Other Major Reasons" and "Minor Reasons" in Table 2.) Seven of these affected at least three of the groups of Skid Row residents, and hence have been listed in the table as "Other Major Reasons." These are:

12. No other place to go
13. Sent here by social agencies to save money
14. Mutual aid among the residents
15. Desire for anonymity
16. Less police trouble; good hideout
17. Communications center for workingmen and transients
18. Accessibility to rest of city

Together, these 18 factors "explain" the presence of Skid Row and why it manages to attract homeless men of the various types. The three additional reasons--the "Minor Reasons"-- are special factors that affect only one or two groups.

TABLE 4-1

SUMMARY OF REASONS WHY HOMELESS MEN OF EACH TYPE  
LIVE ON SKID ROW: VIEWS OF RESOURCE PERSONS

Reasons for living on Skid Row	Types of homeless men						
	Elderly and disabled	Semi-settled workingmen	Migratory workers	Transient "bums"	Resident "bums"	Criminals	Chronic alcoholics
<u>"Common Denominator" Reasons</u>							
1. Cheap lodging and food . . . . .	X	X	X	X	X	X	X
2. Employment opportunities for laborers . .	X	X	X	X	X	-	X
3. Tolerance for deviant and unusual persons.	X	X	X	X	X	X	X
4. Rejection by other communities as a social outcast . . . . .	X	X	X	X	X	-	X
5. Withdrawal from society as a social misfit	X	X	X	X	X	-	X
6. Companionship and association with others of same group . . . . .	X	X	X	X	X	-	X
7. Welfare activities of missions and other agencies . . . . .	X	X	X	X	X	-	X
8. Opportunities and facilities for unlimited and cheap drinking . . . . .	X	X	X	X	X	X	X
9. Secondary importance of dress and physical appearance . . . . .	X	X	X	X	X	X	X
10. Low standards of living--men aspire to nothing better . . . . .	X	X	X	X	X	-	X
11. Tolerance of homosexuals . . . . .	X	X	X	X	X	-	X
<u>Other Major Reasons</u>							
12. No other place to go . . . . .	X	-	X	X	X	-	X
13. Sent here by social agencies to save money	X	-	X	X	-	-	X
14. Mutual aid among the residents . . . . .	-	-	X	X	X	-	X
15. Desire for anonymity . . . . .	-	X	X	-	-	X	X
16. Less police trouble; good hideout . . . .	-	-	-	X	-	X	X
17. Communications center for workingmen and transients . . . . .	-	X	X	X	-	-	-
18. Accessibility to rest of city . . . . .	X	X	-	X	X	-	-
<u>Minor Reasons</u>							
19. Neglect by families . . . . .	X	-	-	-	-	-	X
20. Easy to rob other residents . . . . .	-	-	-	-	-	X	-
21. Base of operations for rackets . . . . .	-	-	-	-	-	X	-

## EVALUATION OF FINDINGS

By pooling and distilling the knowledge of resource persons, it is possible to estimate roughly the proportions of homeless men of each type that are present on Skid Row, and to know the reasons that bring each type of men there ( Table 4-1 ). The analysis leaves certain fundamental questions unanswered, however. (a) It is evident that not every homeless man of a given type is affected by all of the factors listed for that type. What is the comparative importance of each factor for each type of homeless man? (b) These factors are derived from the informal observations of experts, and are subject to errors of sampling bias; most of the observers come into intimate contact with only a limited and highly selected aspect of Skid Row, and hence tend to see it from a particular (and hence biased) perspective. Does the procedure of reporting all responses, relying on each type of bias to round out one aspect of the picture (a procedure followed in this report) really provide a reliable and complete picture? (c) Much information is missing concerning the details of the conditions that exist and the reactions of these men to their situation. What are these details? These unanswered questions will be illuminated in succeeding chapters by an analysis of the responses to the interview with a representative cross-section of the homeless men themselves on Chicago's Skid Row.



## Chapter 5

### WHAT HOMELESS MEN THINK OF LIVING ON SKID ROW

When this research program was first undertaken, a set of questions frequently asked was, "How do the men themselves feel about living on Skid Row?" "Are they satisfied with their life?" "Is this way of living what they really need and want in order to be happy?" "If Chicago did something to improve their living and other conditions, would the public merely be imposing its standards of respectability and comfort upon a group that feels no need for such improvement?" In order to explore this subject, the men were asked a sequence of questions about how well they liked Skid Row living, and what things they liked or disliked about it. This chapter presents the findings derived from the materials assembled. Because these findings are basic to the plan of analysis for later chapters, it has been thought important to give the reader a "feeling" for the situation as well as an objective understanding of it. In order to accomplish these goals, the present chapter is divided into two sections. Section I is a formal statistical analysis; Section II consists of illustrative verbatim quotations taken from the interviews.

#### SECTION I. FORMAL ANALYSIS OF ATTITUDES TOWARD SKID ROW LIVING

##### A. GENERAL ATTITUDE TOWARD SKID ROW LIVING

Contrary to what may be popular belief, most homeless men dislike their way of life. Seven out of each ten men interviewed reported a dislike for living on Skid Row, and only two in each ten said they liked it. This conclusion emerged from a tabulation of responses to the question, "How do you feel about living on (West Madison) (South State) (North Clark) Street? In general, do you like or dislike it?" The results of this compilation are shown in table 5-1. By tabulating separately the verbal side-comments made by the men as they cast their votes, counts were kept of those who indicated extremes of like and dislike--those that indicated they "like Skid Row life very much" and those who said they "dislike it very much." Only 10 percent of the men voluntarily showed enough enthusiasm to receive the "like very much" classification, whereas 22 percent showed enough aversion to be categorized as "dislike very much." The level of liking was lower and the intensity of disliking was higher on West Madison Street than on the other streets, and was somewhat higher among men living in cubicle type hotels than among those living in hotels with rooms. (But there was great variation from one hotel to another. For demonstration of the fact that some cubicle-type hotels are liked very much, see below.) The most intense dislike for Skid Row life was displayed by those living in missions or selected for interview from mission soup-lines. Supposedly, this group is the most depressed by Skid Row living, and hence has the greatest incentive to dislike it.

Irrespective of whether the men answered the above question with a positive or a negative response, everyone was asked "What DO you like (are there any things you DO like) about living here?" Almost everyone

Table 5-1: How Homeless Men Feel About Living on Skid Row

Feeling toward living on Skid Row	Total, all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Likes living there....	20.5	17.5	28.1	20.3	29.5	8.5	...
Neutral or ambivalent.	4.5	4.9	3.3	3.4	6.5	10.6	...
Dislikes living there.	69.8	70.7	67.6	74.9	64.0	80.9	...
No response, in jail, hospital, sleeping out.....	5.2	6.8	1.1	1.4	...	...	100.0
Likes very much.....	9.7	9.0	11.4	10.3	13.1	...	...
Dislikes very much....	21.6	23.4	16.9	26.3	8.7	27.7	...

Table 5-2: Things Liked About Living on Skid Row

Things liked about Skid Row	Total, all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total,*.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
The people..... S.R. is interesting, exciting, always something doing..	23.9	21.8	29.4	27.4	18.5	12.8	14.3
Hotel, living accommodations.....	7.1	7.8	5.4	5.8	10.9	10.6	3.6
Mission activities.	11.4	11.3	11.7	10.3	16.4	10.6	7.1
Freedom to do as you please, dress as you like.....	6.7	7.2	5.4	4.0	...	46.8	14.3
Cheapness of living, lodging, food, etc.....	7.4	7.5	7.4	6.0	11.6	8.5	7.1
Economic facilities, employment centers.....	56.6	59.2	49.9	55.0	63.3	51.1	57.1
Drinking facilities, taverns, tolerance of drinking.....	24.7	21.2	33.8	21.1	38.2	12.8	35.7
Welfare and community facilities...	1.9	2.4	0.8	2.1	1.1	4.3	...
"Feels at home", has friends here, feels he "belongs"	3.8	2.8	6.5	3.1	5.5	4.3	7.1
Likes, but reasons given are vague, or other not elsewhere classified.....	31.1	2.5	4.6	1.7	7.6	4.3	...
No likes reported..	4.8	4.0	7.1	4.8	5.4	2.1	7.1
	15.7	16.5	13.6	17.8	8.7	12.8	21.4

\*Percentages add to more than 100 because each man was encouraged to mention as many different things as he chose.

(84 percent) was able to mention at least one thing about Skid Row life that he liked (table 5-2). Among the things mentioned most frequently as being liked were:

<u>Things liked</u>	<u>Percent of men mentioning*</u>
Cheapness of living. . . . .	57
Employment opportunities nearby, other economic facilities. . . . .	25
The people. . . . .	24
Hotels, living accommodations. . . . .	11
Freedom to do, dress, as you please. . . . .	7
Mission activities. . . . .	7
Interest, excitement, variety of the life. . . . .	7
Welfare and community facilities. . . . .	4
"Feels at home" here, has friends. . . . .	3
Drinking facilities, taverns. . . . .	2

\*Percents add to more than 100 because each person could mention several different things liked.

Surprisingly enough, comparatively few men gave responses that would suggest they found Skid Row life satisfying. Responses of "feel at home," of "find life here interesting or exciting," or "you can be yourself and do as you please," were given by only a small fraction. Most of the likes expressed referred to the hard facts of economics and livelihood--the cheapness of living and proximity to employment opportunities, welfare units, missions, etc. More than one-half (57 percent) mentioned the lower cost of food and shelter as something liked about Skid Row. For a large percentage of the men, this was the only thing favorable they could find to say about their neighborhood. Only 24 percent of the men voluntarily expressed a liking for the other people, their fellow residents.

The men who lived on West Madison Street and those who lived in cubicle type hotels liked fewer things about Skid Row than those living in other areas and those living in hotels with rooms. In general, a higher percentage of the men living in hotels with rooms than the men who lived in cubicles liked the freedom and the feeling of being at home, and found Skid Row life interesting.

When asked "What DON'T you like (are there things you DON'T like) about living here?" almost everyone was also able to mention at least one thing he did not like about Skid Row living. Surprisingly, the two things homeless men mentioned most frequently were (a) the other homeless men; and (b) drunkenness and heavy drinking; 61 percent reported they did not like at least some of their neighbors, and 39 percent did not like so much drinking going on. The frequency with which various things were mentioned as disliked is as follows:

<u>Things disliked</u>	<u>Percent of men mentioning</u>
The people . . . . .	61
Drunkenness and heavy drinking. . . . .	39
Low status of Skid Row residents . . . . .	27
Poor living conditions, hotels. . . . .	24
Skid Row symbolizes failure . . . . .	18
Dirt, deterioration, poor health conditions . . . . .	12
Physical mistreatment. . . . .	7
Eating places. . . . .	5
Economic exploitation. . . . .	5

Although the men are unhappy with physical conditions (see below), their spontaneous complaints were overwhelmingly directed toward social situations and other people in the area. Society at large is unhappy about Skid Row because of the social conditions that exist there, and the way people behave who live there. The men themselves are unhappy about Skid Row for exactly the same reasons. Dissatisfaction with the material aspects--housing, physical deterioration, the physical environment--were mentioned by only about one third of the men who made any complaints. Although this is a high level of discontent with housing, and is strong indication that urban renewal is needed, these results suggest that physical renewal is only a part of the problem; even the homeless men themselves realize this.

Having localized the major aspects about which there was like or dislike of Skid Row living, the interviewer tried to get each respondent to amplify his feelings and to describe them in more detail. This took the form of probing in two directions: (a) his attitude toward his hotel and housing situation and (b) his attitude toward his fellow homeless men.

#### B. ATTITUDES TOWARD THE HOTELS IN WHICH THEY LIVE

In order to learn how homeless men feel about their housing, each was asked, "How do you like living in this (hotel) (rooming house) (other lodging place)? Roughly one-half (47 percent) of the men who expressed an opinion about their hotel stated that they liked living there, while 30 percent reported outright dislike for their present place of residence.<sup>1</sup>

<sup>1</sup>It is believed that these percentages show the housing situation in the best possible light, because many of the interviews were conducted in small offices or open spaces behind the hotel clerk's desk and within earshot of the clerk on duty. However, there were many instances where such a situation did not prevent the respondent from expressing vehement dislike for his lodging place.

Table 5-3: Things Disliked About Living on Skid Row

Things disliked about Skid Row	Total, all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total%.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
The people.....	61.4	63.4	56.4	58.0	77.5	55.3	46.4
Drunkenness and heavy drinking...	39.2	40.2	36.8	35.1	49.8	46.8	39.3
Hotels, living conditions.....	23.5	21.9	27.5	26.1	14.2	29.8	17.9
Mission activities	2.5	3.2	0.8	2.4	...	10.6	3.6
Physical mistreatment, false arrest.....	7.4	8.0	5.7	8.1	3.3	14.9	3.6
Economic exploitation.....	4.8	5.0	4.4	6.0	...	6.4	7.1
Dirt, deterioration, poor health conditions.....	12.3	12.3	12.3	12.6	9.8	19.1	7.1
Eating places, food served.....	5.0	5.8	3.0	5.8	2.2	6.4	3.6
Lack of other community facilities, other.....	0.2	...	0.8	0.3	...	...	...
Dislike S. R. because it symbolizes failure, is not a normal way to live.....	17.9	17.2	19.6	15.5	16.4	34.0	35.7
Dislike low status accorded residents.....	26.5	27.4	24.3	24.9	33.5	25.5	17.9
Dislike--reasons given are vague or general.....	2.5	2.9	1.6	2.7	1.1	2.1	7.1
No dislikes reported.....	14.0	13.4	15.8	15.5	9.8	10.6	17.9

\*Percentages add to more than 100 because each man was encouraged to mention as many different things as he chose.

Table 5-4: How Homeless Men Feel About the Hotel in Which They Are Living

Attitudes toward hotel	Total, all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Likes living in this hotel.....	47.4	46.2	50.4	42.6	60.7	68.1	21.4
Dislikes living in this hotel, total.	45.4	46.3	43.1	51.8	32.7	29.8	32.1
Dislikes living in this hotel, no comparison with other hotels.....	29.6	29.1	31.1	33.8	18.5	21.3	32.1
Dislikes living here, but likes better than other Skid Row hotels.....	15.7	17.2	12.0	18.0	14.2	8.5	...
Neutral--neither likes nor dislikes or ambivalent.....	7.3	7.6	6.5	5.6	6.5	2.1	46.4

An additional 16 percent reported that they disliked their present place of living but considered it better than other places to live on Skid Row. (The remainder of the men were noncommittal.) Thus, almost one half of the men like and one-half dislike their present living situation. The number and variety of things disliked was considerably greater among residents of cubicle hotels than among hotels with rooms, and is somewhat greater on West Madison Street than in the other Skid Row areas.

In table 5-3, roughly one quarter of the men are shown as having volunteered the information that one of the things about Skid Row they dislike was the housing situation. In table 5-4, in reply to a direct question about liking their housing, at least 45 percent expressed dissatisfaction. Both of these figures reveal an impressively large amount of dissatisfaction. Yet it is evident that there are other serious troubles, too. It should not be forgotten that 70 percent showed a general dislike for Skid Row living, while only 46 percent showed a dislike for their housing. The difference (24 percent) represents men who like their housing but dislike Skid Row for other reasons. Also, it should not be forgotten that almost one half of the men are happy with their housing. In later chapters we will find out what kind of people these were--whether they are the derelicts who don't care or whether they are the ones in particular types of hotels.

At least seven characteristics are important to homeless men when they select a place to live. The question "What things DO you like about living in this (hotel, etc.)?" yielded the results reported in table 5-5. The following seven items stood out above all others:

<u>Things liked</u>	<u>Percent of men mentioning</u>
Cleanliness . . . . .	31
Other residents of the hotel . . . . .	22
The management, way clerks treat them . . . . .	22
Quiet . . . . .	19
Hot water, bathing facilities . . . . .	15
Privacy (hotels with rooms, rooming houses) . . . . .	10
Less drinking, less rowdiness than other hotels . . . . .	7

Questions concerning liking for elevators, fireproof construction, laundry facilities did not have a chance to receive a large vote because many hotels do not have these facilities, and the man was being asked to evaluate his particular place of residence. It is noteworthy that, when encouraged, 80 percent of the men were able to mention at least one thing about their abode that they liked.

In many ways, the things disliked about the hotels in which they live are simply the reverse of the things liked. In response to the query, "And what DON'T you like about living in this (hotel, etc.)?" the following list of "gripes" emerged:



Table 5-5: Things Homeless Men Like About the Places in Which They Live

Things liked about place of residence	Total all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total*,.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Cleanliness .....	30.9	28.4	37.3	33.1	30.5	21.3	14.3
Quietness.....	19.4	20.6	16.3	17.1	29.5	21.3	3.6
Privacy (hotels, with rooms)....	9.7	8.4	12.8	7.4	20.7	...	7.1
Hot water, bath- ing facilities	15.3	14.6	16.9	17.1	14.2	8.5	3.6
Laundry, other facilities for personal care .....	3.3	4.1	1.4	3.8	2.2	4.3	...
Fireproof con- struction .....	2.5	2.1	3.3	3.1	1.1	...	3.6
Elevator.....	0.7	1.0	...	1.0	...	...	...
Less drinking, less rowdi- ness here .....	6.6	7.3	4.9	4.8	10.9	12.8	3.6
The management ..	22.1	20.4	26.4	20.0	29.1	31.9	3.6
The other residents.....	21.6	21.2	22.6	20.4	24.0	38.3	...
Other reason, not classi- fied above ....	15.1	15.3	14.7	16.4	16.4	8.5	...
Likes hotel, but reasons given are vague.....	8.1	8.3	7.6	5.6	9.8	14.9	28.6
Nothing liked or no likes reported .....	20.5	23.0	14.2	22.8	9.8	10.6	53.6

\*Percentages add to more than 100 percent because each man was encouraged to mention as many different things as he chose.

Table 5-6: Things Homeless Men Dislike About the Places in which They Live

Things disliked about place of residence	Total, all areas	Areas		Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total%....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Dirt, poor maintenance.....	18.7	17.4	22.1	19.5	20.7	8.5	14.3
Noise.....	17.7	18.4	15.8	23.1	5.5	10.6	3.6
Theft.....	4.2	2.8	7.9	5.4	2.2	2.1	...
Poor bathing facilities, insufficient hot water, toilets	5.7	4.8	7.9	7.7	2.2	...	...
Rooms too small, dislike for cubicles.....	16.7	15.2	20.7	20.5	6.5	14.9	10.7
Place not fire-proof.....	1.4	1.9	...	1.4	2.2	...	...
Stench, poor ventilation...	1.5	1.6	1.4	1.7	1.1	2.1	...
Too much drinking, rowdiness	16.7	16.5	17.2	20.5	9.8	2.1	14.3
The management..	3.5	3.0	4.9	3.4	2.2	10.6	...
The other residents.....	16.2	15.9	16.9	18.5	12.0	10.6	10.7
Other reasons, not classified above....	8.4	8.8	7.6	6.6	13.1	14.9	3.6
Dislikes hotel, but reasons given are vague.....	4.4	3.8	5.7	3.1	6.5	8.5	7.1
Nothing disliked or no dislikes reported.....	37.2	39.4	31.6	32.1	45.5	44.7	64.3

\*Percentages add to more than 100 percent because each man was encouraged to mention as many different things as he chose.

<u>Things disliked</u>	<u>Percent of men mentioning</u>
Dirt. . . . .	19
Noise . . . . .	18
Rooms (cubicles) too small. . . . .	17
Too much drinking, rowdiness. . . . .	17
Other residents of the hotel. . . . .	16
Poor bathing facilities, not enough hot water, not enough toilets . . . . .	6
Theft of belongings, jackrolling. . . . .	4
The management, way clerks treat them . . . . .	4

More than one third of the men could not mention anything about their living situation which they disliked, and hence appeared to be fully satisfied. This is a very important finding. Almost one half of the men on Skid Row like their living place and more than one third have no fault whatsoever to find with it. This suggests that some of the places to live are good and well-operated, even though others may be bad and poorly operated. In order to test this hypothesis the responses to the question, "How do you like living in this place?" were tabulated separately for each hotel. This permitted a rating of each hotel according to what percentage of its residents reported they liked living there. Although the rules of confidentiality prevent a reporting of the score for each hotel by name, by grouping the hotels it is possible to learn to what extent the men rated them as being "all alike"--and to what extent they rated some as being much better than others.<sup>2</sup> Following is a summary of the intensity of their like or dislike for their lodging places:

<u>Percent of resident who report they like living in their present place of residence</u>	<u>Number of cubicle hotels</u>	<u>Number of hotels with rooms</u>
Total. . . . .	34	37
90 to 100 percent like living here. . . . .	6	18
70 to 89 percent like living here . . . . .	3	1
50 to 69 percent like living here . . . . .	9	7
25 to 49 percent like living here . . . . .	9	2
Less than 25 percent like living here . . . . .	7	9

<sup>2</sup>The scores for individual hotels do not necessarily measure objectively the quality of living conditions in that place, for three reasons. First, the sample was so small that the score for individual hotels has a large sampling error. Second, the kinds of men living in a place varied greatly from hotel to hotel. For example, a group of alcoholic derelicts living in a very dilapidated place may give it a high rating of "like" because the management is permissive of drinking, while a well-operated and very clean hotel that excludes drinkers entirely may get a low rating because it is occupied by workingmen who have ambitions to get off Skid Row and live better, and hence are dissatisfied with their present situation. Finally, liking for a place is not necessarily identical with good housing conditions; it is shown in the summaries above that the reasons given for liking a hotel do not all pertain to the physical condition of the place. Despite these limitations, the scores are invaluable for showing the existence of diversity.

It is unmistakably clear that the management of some hotels has only happy customers, while in other hotels almost everybody dislikes living there. The most logical interpretation to place upon such results is that there is a very great variation among the hotels in their physical condition, in the way they are run, and in the way the men are treated. It is difficult to understand how a hotel can rate 90 to 100 percent approval by its occupants unless the management has made a determined effort to provide those items that the men like (table 5-5) and to minimize the things that the men indicate they dislike (table 5-6). One-third of the hotels (6 cubicle-type and 18 hotels with rooms) received such a rating. Conversely, it is difficult to understand how more than one-half of the residents can dislike the place in which they live unless the building is so old and the management is so greedy to maximize profits that almost nothing is or can be done to furnish the things the men like and to eliminate the things they dislike. Yet almost one half of the hotels fall in this category (16 cubicle hotels and 11 hotels with rooms). On the basis of these ratings, one might suspect that all hotels on Skid Row might be subdivided roughly into three categories:

	<u>Cubicle hotels</u>	<u>Hotels with rooms</u>
<u>Acceptably good and well operated</u> (rating of 70 to 100 percent) . . . . .	9	19
<u>In need of rehabilitation and possible change of management</u> (rating of 50 to 69 percent) . . . . .	9	7
<u>Candidates for demolition</u> . . . . .	16	11

It is not suggested that the votes cast by the men be adopted as the criterion for action. These calculations were made merely to show that there are good hotels and bad hotels on Skid Row, and that the men themselves are aware of this. When plans are made to renew Skid Row areas, thought should be given to capitalizing upon the knowledge and experience of the good operators, instead of making the mistaken assumption that all are bad. By the same token, care should be taken to avoid listening to the counsel of operators whose record is not good.

C. WHAT HOMELESS MEN THINK OF EACH OTHER

Exploratory and experimental work had already hinted that homeless men felt very little sentimental attachment for each other. To test this hypothesis, the question, "What do you think of the other men that live on this street?" was included in the interview. The results, shown in table 5-7, reveal that 40 percent of the respondents showed open dislike for the other men and an additional 26 percent were unenthusiastically noncommittal or ambivalent in their responses. Thus, less than one third of the men said they liked other homeless men. The level of dislike was higher on West Madison Street than in other Skid Row areas. The men who live in single rooms tend to dissociate themselves from Skid Row, and hence were considerably above-average in showing dislike for the other residents.

However, when asked "What DO you (is there anything that you) like about the men?" all but a very small percentage (85 percent) were able to think of at least something they liked about the Skid Row residents or that would express

Table 5-7: What Homeless Men Think of Other Homeless Men on Skid Row

Like or dislike	Total, all areas	Areas		Type of Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Don't like other homeless men.....	40.4	44.1	30.8	39.7	40.4	44.7	42.9
Noncommittal or ambivalent.....	26.0	25.4	27.5	25.7	28.0	27.7	17.9
Like other homeless men.....	31.2	27.6	40.3	32.5	29.5	27.7	25.0
No information.....	2.5	2.9	1.4	2.1	2.2	...	14.3

Table 5-8: Things Homeless Men Like About Other Homeless Men on Skid Row.

Things liked	Total, all areas	Areas		Type of Residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total*.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Identification--"my kind," "like me".	11.8	10.3	15.8	12.8	8.7	8.5	17.9
Congeniality-- friendly, good to talk to.....	41.4	39.3	46.6	42.6	36.0	51.1	32.1
Security--will help you.....	20.2	20.0	20.7	21.9	12.0	25.5	25.0
Empathy--feel sorry for them, pity them.....	18.6	21.2	12.3	16.9	16.4	38.3	25.0
Impersonality-- they don't ask question, leave you alone, mind own business.....	15.0	14.0	17.7	14.9	19.3	6.4	10.7
Tolerance--don't care what you do, how you are dressed, how you look.....	1.4	1.3	1.6	1.7	1.1	...	...
Generosity--will give you money, drinks.....	1.3	1.2	1.6	1.0	2.2	...	3.6
Industry--they work.....	10.7	11.6	8.2	10.3	14.2	6.4	7.1
Other things liked, not listed above.	2.3	2.6	1.6	2.4	3.3	...	...
Like, but reasons given are general, vague.....	8.1	8.3	7.4	6.6	9.8	12.8	14.3
Nothing liked, no likes reported...	14.9	13.5	18.5	12.8	19.6	14.9	25.0

\* Percentages add to more than 100 percent because each man was encouraged to mention as many different things as he chose.

tolerance or sympathy with them. The things mentioned, ranked in order of frequency of mention, are:

<u>Things liked</u>	<u>Percent of men mentioning</u>
Congeniality--friendly, good to talk to . . . . .	41
Security--they will help you when you need it. . . . .	20
Empathy--respondent feels sorry for them, pities them. . . . .	19
Impersonality--don't ask questions, leave you alone. . . . .	15
Identification--they are my kind, like me . . . . .	12
Industry--they work, earn their own way . . . . .	11

Some of the above categories, into which the multitude of responses were fitted, certainly do not specify traits or characteristics of the men. Instead, they reflect the kinds of things the respondents said when asked to say something nice about close neighbors for whom they have little feeling. (Table 5-8 provides details by area and type of residence.)

In contrast to the statistics just cited, when invited by the question, "What DON'T you (is there anything that you DON'T) like about the other men that live on this street?" to state what they dislike about other homeless men, 93 percent of the respondents had at least one critical comment to make, and their complaints were quite specific and detailed. (For statistics, see table 5-9.) Several of these criticisms were directed to all of the residents generally, while many of them were directed toward specific groups. The most common dislikes, ranked, were as follows:

<u>Things disliked</u>	<u>Percent of men mentioning</u>
Drinking--they drink too much . . . . .	63
Begging--they bum you, look for a touch . . . . .	23
Jackrolling--too many jackrollers . . . . .	21
Other crime--numbers, rackets, theft. . . . .	18
Laziness--lots of them won't work . . . . .	15
Noisiness, rowdiness. . . . .	14
Belligerence--they fight, bully each other, quarrel . . . . .	10
Personal hygiene--they are dirty, not clean . . . . .	11
Abnormal personalities--physical, mentally deteriorated . . . . .	10
Coarse language--they talk rough, loud. . . . .	6
Filthy habits--spitting, public urinating, etc. . . . .	6
Lack of generosity--they won't help you . . . . .	6
Low cultural status--low level of intelligence. . . . .	5
Dishonesty--they cheat, steal . . . . .	4
Lying, excessive bragging, false pretenses. . . . .	3
Unhealthy--they are diseased, not healthy . . . . .	3
Unkempt appearance--they don't shave, bathe, take care of themselves. . . . .	2

Table 5-9: Things Homeless Men Dislike About Other Homeless Men on Skid Row.

Things disliked	Total, all areas	Areas		Type of residence			
		West Madison	Other	Cubicle hotels	Hotels with rooms	Missions	Other
Total*.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Drinking--they drink too much.....	63.0	63.8	61.0	59.7	71.6	76.6	50.0
Begging--they bum you, look for a touch.....	23.1	25.0	18.3	19.6	36.0	21.3	17.9
Jackrolling--too many jackrollers.....	21.1	23.6	14.7	20.6	24.0	17.0	21.4
Other crime--numbers, rackets, thefts.....	17.7	17.1	19.3	15.3	27.3	12.8	17.9
Personal hygiene--they are dirty, not clean.....	11.0	11.0	10.9	12.9	4.4	14.9	7.1
Derelicts, abnormal personalities--physical mental deterioration, psychoneurotics.....	9.9	10.4	8.7	9.8	12.0	6.4	7.1
Low cultural status--low level of intellectual interests.....	5.1	5.0	5.2	5.8	3.3	4.3	3.6
Laziness--lots of them won't work.....	14.5	15.4	12.3	14.8	14.2	14.9	10.7
Belligerence--they fight, bully each other, quarrel.....	10.4	10.0	11.4	9.6	13.1	12.8	7.1
Dishonesty--they cheat, steal, not honest.....	4.2	4.9	2.5	3.1	4.4	6.4	17.9
Unhealthy--they are diseased, not healthy.....	2.6	3.3	0.8	3.1	1.1	4.3	...
Race mixture--dislikes presence of other races, nationalities.....	7.8	6.9	9.8	3.6	22.9	6.4	...
Coarse language--dislikes language used.....	6.3	6.2	6.5	6.2	6.5	6.4	7.1
Filthy habits--spitting, public urinating, etc..	5.9	5.8	6.3	7.5	1.1	6.4	3.6
Unkempt appearance--men do not shave.....	1.9	1.7	2.5	2.1	1.1	2.1	3.6
Noisiness, rowdiness--of men.....	13.7	13.6	14.2	15.3	9.8	14.9	7.1
Transiency--here one day, gone the next.....	2.0	2.1	1.6	2.1	2.2	...	3.6
Lack of generosity--they won't help you.....	5.7	7.1	2.2	5.8	3.3	14.9	...
Lying, excessive bragging, false pretenses.....	3.1	3.4	2.5	3.1	2.2	4.3	7.1
Older men--dislikes so many old men.....	2.1	1.3	4.1	2.4	2.2	...	...
Kids, young men--dislike so many young men.....	4.6	4.7	4.4	3.4	6.5	...	21.4
Vague--dislikes, but reasons given are vague.....	1.2	0.9	2.2	1.0	1.1	4.3	...
Nothing disliked--no dislikes reported.....	7.4	6.2	10.4	7.9	3.3	12.8	10.7

\* Percentages add to more than 100 percent because each man was encouraged to mention as many different things as he chose.



As a further probe of this situation, each man was then asked, "How many close friends do you have here?" The results, as table 5-10 shows, were that:

39 percent of the men have no close friends on Skid Row  
 45 percent of the men have only a few close friends there  
 16 percent of the men have a great many close friends there

Those who reported having no close friends were then asked, "Why do you suppose you have not found any friends among the men here?" The answers received fell into four categories:

<u>Reasons for having no friends on Skid Row</u>	<u>Percent of men mentioning</u>
I don't want to be friends with these men. . . . .	62
You can't trust these men. . . . .	8
These men are incapable of friendship. . . . .	17
I haven't been here long enough to make friends. . .	11

If a respondent said that he had at least some friends or many friends on Skid Row, he was asked, "Are your friends different from the other men on the street? In what way?" About three fourths of those who had friends claimed that these friends were different from the other men on the street:

<u>How are your friends different from other men on the street?</u>	<u>Percent of men mentioning</u>
<u>My friends are different. . . . .</u>	73
I can trust my friends; they will help me if I need it..	31
My friends drink less than the others. . . . .	20
My friends work, work steadier. . . . .	20
My friends are more "normal," more like other people. .	18
My friends are "better"--cleaner, better dressed, better jobs. . . . .	11
My friends are not bums, do not beg. . . . .	5
<u>My friends are not different. . . . .</u>	27

Together, these data present a picture of the Skid Row social world that is far different from that suspected by many. Here we have a neighborhood where only 31 percent of the inhabitants say they like their neighbors, and where only 16 percent have more than just a few close friends (with 39 percent having no friends at all). When asked why this situation exists, they express strong aversion for the kinds of people who live on Skid Row, and state bluntly either that they don't want to associate with these men or else that they aren't the kind of people you can make friends with. When friendships are formed, the friends are thought of as being "different" (in the sense of being better) from the other residents rather than being normal citizens of the area. If asked what

Table 5-10: Friendliness of Homeless Men for Each Other

Measures of friendship	Total, all areas	Areas		Residence			
		West Madison	All others	Cubicle hotels	Hotels with rooms	Missions	Other
NUMBER OF CLOSE FRIENDS.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Have no close friends on Skid Row.....	38.6	41.9	30.4	36.7	38.7	40.4	69.6
Have a few close friends on Skid Row.....	45.0	43.5	48.7	44.3	49.1	51.1	21.7
Have many close friends on Skid Row.....	16.4	14.6	20.9	19.0	12.3	8.5	8.7
REASONS FOR NO CLOSE FRIENDS*....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Don't want to be friends with these men.....	62.8	58.2	78.7	64.2	65.2	52.9	50.0
You cannot trust these men.....	8.4	8.7	7.4	9.2	5.8	5.9	12.5
These men not capable of real friendship.....	17.7	19.3	11.1	15.2	20.2	29.4	18.8
Have not been here long enough to make friends.....	11.3	13.8	2.8	11.4	8.7	11.8	18.8
HOW FRIENDS ARE DIFFERENT*.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
My friends are not different.....	26.7	24.0	32.4	29.8	18.2	17.9	42.9
My friends drink less than the others.....	19.9	20.6	18.4	16.7	25.5	39.3	....
My friends work, work steadily....	19.5	24.2	9.6	17.1	23.6	28.6	28.6
My friends are not bums, do not beg. I can trust my friends; they will help me.....	4.5	4.9	3.6	5.0	3.6	3.6	....
My friends are "better" than others -- cleaner, better dressed, better jobs.....	30.9	33.8	24.8	32.4	23.6	39.3	28.6
My friends are more "normal", more like other people	11.4	10.6	13.2	9.4	14.5	25.0	...
	17.5	17.6	17.2	16.7	23.6	10.7	...

\*Percentages add to more than 100 percent because each man was encouraged to mention as many different things as he chose.

is disliked about these men, they are criticized in terms that one would expect a critical outsider to use--the drunkenness, the begging, the jackrolling, the noise and rowdiness, the laziness, and the lack of cleanliness. Moreover, this entire complex occurs in a situation in which the individual man dislikes living here, even though he may not dislike his particular hotel or rooming house. Under these circumstances, one can only conclude that any conception of Skid Row as a tightly-knit, well integrated and organized community where most of the residents interact freely and have a common culture and tradition is a complete myth. Instead, Skid Row seems to be composed largely of discontented individuals who live in semi-isolation, who have few if any close friends, and who survive by being suspicious of everybody. Almost one half of them dislike their housing, and criticize it by making use of standards that reveal they "want to live like other people." The exception to this picture is a smaller group of persons (the minority) who have many friends here, who like living on Skid Row, and whose friends are not different from other men on the street. This minority group will be studied intensively and compared with the larger group in later chapters.

Moreover, it is very evident that Skid Row is a street-divided over the issue of heavy drinking. The 60 percent of the men who are nondrinkers, light drinkers, or moderate drinkers (see chapter 2) dislike living among the 40 percent of men who are heavy drinkers or periodic drinkers--and with the jackrollers and other concomitants of the drinking complex. There is much evidence that this dislike is very intense, for it is expressed in one or more categories of each of the statistical tables that records "things disliked." For example, in table 5-3, 39 percent of the men reported they disliked living on Skid Row because of the drunkenness and heavy drinking. In table 5-6, 17 percent of the men said they disliked living in their particular hotel because there was too much drinking and rowdiness there. In table 5-9, 63 percent of the respondents said they disliked the heavy drinking among the men who live on Skid Row. Paradoxically, this dislike often is expressed, when sober, by men who themselves are heavy drinkers. This dislike of persons who are not chronic alcoholics for those who are probably is as intense as any racial or ethnic prejudice in the city. The data presented above imply that roughly one-half of Skid Row's population is forced by weight of simple poverty--due to inflation, disability, small pensions, etc.--to live among a group of people it dislikes, fears, and avoids. It dislikes living in a type of housing (cubicles) that gives it no insulation from the sights, sounds, and smells of chronic alcoholism--either during the daytime or at night. It resents the low social status that it acquires by reason of having a Skid Row address which identifies it with alcoholism.

Thus, in Chicago there seem to be two types of Skid Rows, whose populations are intermingled: (a) The Skid Row of the unattached man with low income who drinks moderately if at all, and (b) the Skid Row of the chronic alcoholic, the jackroller, the lazy beggar, and the derelict in an advanced stage of mental or physical deterioration. The first of these Skid Rows seems to be composed of more or less "normal" persons, who came here in response to economic pressure. The second of these Skid Rows seems to be composed of more or less "abnormal" persons who are here in

response to economic pressure but also because they are psychologically disturbed or because they are socially deviant in comparison with society at large. In future chapters some further light will be shed on this hypothesis.

## SECTION II: QUOTATIONS FROM INTERVIEWS WITH HOMELESS MEN

Most of the men interviewed tried hard to convey a picture of what their life was like, and how much they liked or disliked it. They felt that at long last they were getting a chance to tell the world outside about their way of life. The statistical tabulations that have been presented and analyzed above cannot convey the feeling that lay behind their responses. In order to correct this deficiency, quotations have been selected from the interviews, and are reproduced here in four groups. Each of these major groups is broken down into two subgroups, one dealing with positive and one dealing with negative responses.

- Group A. Attitudes toward Skid Row in General
  - A-1. Things disliked
  - A-2. Things liked
  
- Group B. Attitudes toward Hotels
  - B-1. Things disliked
  - B-2. Things liked
  
- Group C. Attitudes toward Other Men on Skid Row
  - C-1. Things disliked
  - C-2. Things liked
  
- Group D. Friendships on Skid Row
  - D-1. Why respondent has no friends
  - D-2. How friends are different from other Skid Row men

Here are some of the things the men said:

Group A-1. Attitudes toward Skid Row in General -- Things Disliked

It's the crummiest spot in the state. It should be torn down, abolished, done away with. The filth, and I'm in the middle of it. Oh, the overall picture. They should clean up the place. When I read that in the paper about tearing down the street I thought that was the best idea they ever had. The restaurants are filthy. Lots of dirt and grime. It could be changed if somebody put their foot down. There isn't anything good about it.

I don't like to walk on the street and have everybody ask for five cents for a bottle of wine. I don't think old age pensioners should be allowed to get a room and spend rent money for wine. It's all jackrollers and stuff around. If they would do away with the soup lines more men would want to go to work.

The lowest class live around here. I ain't no angel, but I like to live halfway decent. I don't want to get acquainted. The more friends you got the more they bleed you for money. The hotel is decent, but it's the people. I got to be here because I don't get a steady salary. If you've got no jobs, you've got to live around these neighborhoods. Things are pretty cheap around here.

There's no such thing as liking it. This place is far from a rose, if you know what I mean. Most guys are animals around here. Oh God, nobody likes it. They could burn down the whole street and we'd all be better off.

Bad reputation of the neighborhood. The drunkards, the dirt in the neighborhood, the prostitutes who scream at night, thefts. I don't like the idea that people think that because we live here because of necessity we are just like the others. I'm ashamed to live here.

I accept the street; I don't like it. I have presently no choice. It is cheap living. Work is scarce. It is just a lower level of living. You can get more here for a dollar: a bed to sleep and some soup. This is considered the street of hopeless men, the rock bottom of society. However, you can retain your own respectability if you want. I dislike it for what it does for the men. I like it here because you can come and go; you are subject to no control.

There's no social life, no family life. Here you are by yourself. You see a lot of drinking here.

The boys drink too much. They drink out of the bottle on the street. It does not look so good.

If you stay to yourself it is as good as any other street. If you start mingling, you get in trouble. As much money as I get, I can live and exist. If I'd get better wages, I would like to live someplace else.

Group A-1. Attitudes toward Skid Row in General -- Things Disliked (cont.)

I don't like it, truthfully, but it's a case of necessity. So many things (not liked). All this drinking, panhandling, swearing at one another; I don't like that. Lots of these fellas think I draw my pay check on Saturday and am supposed to divide it up with 'em. And because I don't they think I'm a heel. I don't go out much, don't mingle with the men. I don't feel superior; I just don't care to mix with them.

A man never gets no rest around here. When I go up to bed I don't get to sleep because of the noise upstairs. Another thing, the small globes, you can't read a paper in your room.

Well it's dangerous to walk down the street after dark for one thing. Quite a few of these gentlemen aren't particular in taking overcoat or what have you. You might wind up in the hospital for being assaulted.

I don't like the rooms. They're open on top. I'd like a little privacy and a little comfort. I don't booze around and I don't get along with the drinking bunch. But there are a lot of nice fellows in this hotel. It's not a desirable place to live. It's a place where a fellow can go when he gets up against it.

Well, it's Skid Row. You hang around here and after a while you start drinking.

Well, it's too many colored. Practically everyone here are drunkards and make noise day and night. I got hurt and got on welfare. I been here only two months.

This is not my environment. This is the street of forgotten men. These people are lost. I like to be with people, but not with these. I like nothing, absolutely nothing, about Skid Row. It's just that I must stay here.

People who live in better neighborhoods think all people here are no good, but people have to live according to their income. There's a little danger around here. Some people will put a knife in your neck if you don't watch out. If a guy looking for a job gives an address around here they think you're a bum and won't hire you. If I could afford it I'd live in a high class neighborhood.

A man who lives down here is a downcast. He's beat before you start. The people you have to associate with; they're always looking for a drink. And I used to do the same thing. When I came out of the hospital I turned Christian. I quit drinkin'. When I told the guys, they thought I was psycho. They tried everything under the sun to get me to drink, but I wouldn't do it. You know, they call you all kinds of names if you don't drink. And I used to do the same thing. Well, I don't like living in

Group A-1. Attitudes toward Skid Row in General -- Things Disliked (cont.)

a dump like this. It's noisy as hell around here. Drunks are fighting. If you go to the bathroom you might come back and not have anything left in your room. It lowers your social standing. Sure, if I had money I wouldn't live here, but what are you going to do? Well, I can't think of anything I like about living here. I'd have to think a while.

Too many jackrollers and drunkards. They call you s. o. b. and m. f. Forgive me for saying it. I don't like that kind of language. I'm gonna hit 'em with my cane. (pensioner)

There's nothing I like about it, friend! They fellows don't hardly bother me because I went to school with many of them. But it's what I see them do to others. If you just got a quarter or anything they're liable to hit you in the head.

I'm just livin' here 'cause I ain't got no money. It's not suitable for me. You don't want to mix with everybody. This is just a place you come by; you don't stay here. But if you ain't got no money, you're stuck.

Too many guys drinking, so I start too. Outside of that the men are all right: good and bad, the same as anywhere else.

I can't like anything about it. It's a place you go when there's nowhere else for you, when you can't have money and you've got to have liquor.

Too many robbers. You get hell knocked out of you when you get gassed up, and guys mooching you all the time.

Dirt, filth. No one is down there except trash. They have no training and no breeding. Most of the men are no-good two-legged animals. They have very low intelligence. I hate them. There is nothing they wouldn't do, rob, lie, cheat.

It was all right until the hillbillies started coming in. They spoiled it.

Well, I don't like it, but in my position a guy has to take what he gets. I live on this street because I have to. I don't like the environment. I call it a sin. There is a bottle everywhere. It makes you ashamed of your own race. Any guy with any pride wouldn't find anything worthwhile here.

I just got to get off. I'm killing myself. (I don't like) the filth, the dirt, the way you have to live in these buildings. It scares me to death when I look around and see these old men, these bottle pickers.



Group A-1. Attitudes toward Skid Row in General -- Things Disliked (cont.)

These are all men without homes. They don't care what happens. You walk down the street and somebody may stop and pound the daylight out of you. You take a chance on your life. That's why there's so many crippled people in the lobby.

You gotta be careful. If you show a \$5 or \$10 bill there's eyes all over it.

The filth and type of people. Too many degenerates live here. They drink too much.

I'm not around much (works steady at night). I like the hotel, the cleanliness. The clerks are very helpful and congenial. I've seen three fellows die this week. Drop dead. One on the bridge. I'd stop some of these saloons that sell the poison. I don't like it, but after all, I'm just a little guy.

Want my real honest-to-God opinion? When a guy is down and out it's cheap. If I had a good job I wouldn't be here twenty-four hours. I sure don't like it. Well, it's just entirely too dirty. And I don't like to be around dumps. Well, I think that would cover it.

I don't like the cages. I would like to have my own housekeeping room.

You just ain't nothing. You're always feeling low.

Too many guys with time on their hands. They drink too much and pester you to do it too. The racial situation is bad down here too, too many colored people coming in. This address is bad when you want to get a job. They think you're a wino and undependable.

Dislike only just one thing, them God-damned niggers (State Street).

I guess deep down what I don't like about it is what you yourself wouldn't like about it. All the sordidness, dirt, filth; oh, the people, the hotels, everything.

Well, it's just the bottom. You gotta be drunk to stay on this street.

Well, it's the class of people. You find quite a few hoodlums. They take advantage of a fella when he is intoxicated, knock 'em in the head and rob them. Also, it's a slum neighborhood with old dilapidated buildings. There are some hoodlums right in this hotel.

It's the environment. When I go to the washroom, if my door is unlocked, somebody comes and steals my clothes.

Group A-2. Attitudes toward Skid Row in General -- Things Liked

The hotels are clean and the beds are clean and the rent is cheap. You can go in the restaurants and eat and pay half what you would farther down in town. If any drunks come around they (hotels) throw them out.

I like it because I'm against anything fashionable. I like plain (simple) living.

I like the convenience of transportation, the reasonable rent, and the shopping. You can buy clothes and musical records cheap.

If I go any other place, they'll throw me out. I used to have a good home like you do. Pretty soon I'll kick the bucket myself. As far as work goes, I can work, if I get the wine out of my stomach. You got to live down here. The boys down here work with you. Last week I got some money. Next week I'll get it from somebody else. We're Madison Street Bums. Where'm I gonna go? I ain't got no family.

I was born in the neighborhood. Lived here most all my life. I find no fault in it.

It's all right. If thousands live here I can live between them. Nothing gets on my nerves. I'm used to this place: lots of old-timers. They don't bother me; I don't bother them. Everybody knows me.

You can live down here pretty cheap. Cheap restaurants where you can buy cheap food. Nobody pays any attention to you if you take care of your own business.

It's reasonable. I can get by on a couple of dollars a day. Actually there's nothing else (I like).

No, nothing I like. Only thing I like is that God helps me. If he didn't help me, I'd be in a ditch.

You can always get a drink here when you can't anyplace else. You can be here when a man gets down filthy dirty and can't go to a decent part of town.

It's a cheap place to hang around. It's a question of economy with me. All the kinds of jobs I can get is spot labor now and then, and I can't make enough money out of it to stay anywhere else.

Live the way you want. You don't have to be rich to be around here. If you can't change suits every day people don't look at you like you're crazy.

Group A-2. Attitudes toward Skid Row in General -- Things Liked (cont.)

A man can get used to anything. I'm calloused; it's a way of life to me now.

It's cheaper. You can get by with less money. A little better place to look for work. There are more employment offices to look for work.

When a man's on relief, you gotta live where it's cheap.

It's cheap. Lots of good people here. Some of the bartenders are friendly. The restaurant man is friendly. Food is cheap. I don't have to go far to go to my job. The hotel is clean and service is good here. They call me in the morning. I can borrow money from these people if I need any. The boys are good.

Well, I can't afford the money to go out to get a room. If I could afford it, I'd move back to Evanston (works in Country Club in summer).

It's free and easy. You can get up in the morning and can do what you want. Nobody asks questions.

I don't like it here but I always come back. I don't know why. I don't know what happens. I think it is just a weakness of the individual. If a man is healthy, he wouldn't do it.

It's cheap, and would you believe it, there's a lot of good guys down here. It's a good place to make friends.

The only reason I'm down here is all my friends are down here. Most of them do the same kind of work I do. In this district you can go in a tavern and a woman is going to solicit you. Further west you can't do that.

I feel all right. I live here twenty years. It's all right; I like it here. I like my job. I eat. A little drink. Like sleeping here. No, no, I like everything long as I can stay here. I like everybody, because everybody let me live, don't do me no damage. I work for my living, everybody be my friend. (Polish immigrant)

You get cheaper rent; can live cheaper. I appreciate reasonable prices for food. Well, no. That's the only thing; it's cheap.

If I drank I could say I liked the taverns, but I don't drink. It's cheap, the second hand stores. You buy 'em cheap; better have 'em cleaned first, though. The food's cheap, but it's lousy. They hardly bother to wash the dishes.

It's cheap. If you don't have a steady job you can go to the mission houses. It's not much, but it keeps you from starving.

Group A-2. Attitudes toward Skid Row in General -- Things Liked (cont.)

Employment agencies are here.

You can get free bed and soup. It's all right if you ain't got nothing else. (Is staying in a mission.)

I guess subconsciously I feel that I can do all the drinkin' I want and none of my people will know about it.

When you're on the bum you can get a cheap place to stay. You can get spot jobs there; you can always run into someone who might stake you.

No use to kick (about Skid Row); I gotta like it. I was living at \*-----, but I didn't have no money, so I had to leave the room and that's why I came here. I make this my home. I can't do no better. I'm an old man now. It's cheap. I make up my mind to like anything. (71 years old) (resigned)

It seems almost like home to me. When I came up from the South, I first landed here. It's like home here. The only reason I say I really like it 'cause there are more colored people here. (is a Negro)

It's a free life. That's about all. You can do more or less as you like, be away from society and the social life.

If only I had a job I'd be all right. It's all right (on Skid Row). You don't bother nobody; nobody bothers you. They're not too bad. A lot don't care if they never work and don't try.

It's a kind of companion to working class of people. You can talk. But they get on this drinking.

You can meet good friends here. I think everybody is friendly here, more so than in any other part of Chicago.

I enjoy it in a way. I just sort of have a habit of coming here. It's like a cycle. I can just about adjust to any place. Things here are just all right. You talk to the men here and it's a place where you can get work. It seems you want to come back to the same stamping grounds.

Group B-1: Attitudes toward Hotels -- Things Disliked

I don't like to live in a barn like this. If I wasn't a drunken man I would not be here.

I've been here since October and the maid swept the room once, but puts clean sheets on every Monday. You can't carry money, or if you do you'll get knocked in the head. Sanitary conditions ain't so good here. I can't sleep here unless I'm drunk. The toilets are no good. The maid is as lazy as hell. All she wants to do is f--- if you got \$3.00. The toilet is unsanitary. Most of the time the stools won't flush.

I have to take it. What are you going to do? You got no money, so, what you do?

Two thirds of these people wouldn't live here if they didn't have to.

They got all those tramps coming up. They fall off the commode, and I say to myself what am I doing here? It's just out and out just plain no good. It's no place for anybody that's got sense.

They're drinking in their rooms, making noise and trouble. They don't go to washrooms, do it in their rooms. There's no ceiling, just chicken coops. The air comes in from floor and ceiling. If men do in their rooms what they should do in the washrooms, how can you like it?

Guys talking all night to themselves. Somebody vomiting on the floor. You don't know if somebody's going to urinate on your floor.

If a man lives in a place like this hotel he can't respect himself. Guess a man doesn't care about anything if he comes here. Nothing I like about it except the cheap rates. Lots of these people have bad diseases, have t. b. They should be in hospitals. You have to mix with everybody and put up with them.

I don't like to sit around in the lobby with these drunks. The beds aren't clean. They fight and raise hell all night upstairs and I can't sleep.

Washbasins have no soap, no cleanser or nothing to clean the bowl. Most of the guys use the same towels. It's filthy. It's no wonder guys get sores on their faces.

I don't like the cages. There is very little privacy. The men snore, some are drunk. It's lots of noise around here.

They should make this thing fireproof. We seen these other persons burned to death and they shouldn't allow any wineheads in this place.

Group B-1: Attitudes toward Hotels:-- Things Disliked (cont.)

It is not homelike. It is just to be away from the street. It is nothing to look forward to. The men wind up with t. b. here. It is room just to turn around. It is noisy and crowded. I get headaches here. This place here is a firetrap -- there is no adequate fire safety. Lots of the clerks are hustlers for the colored girls (cleaning maids).

Noise and drunks. They come in all hours of the night drunk. It's dirty and there is no privacy.

They're all just somewhere to get in out of the rain. They're dirty and cramped--no real place to live. It's obvious, isn't it?

Some of these hotels are a disgrace. It's the men who make the hotel.

I don't like to live together with these people. It is dirty, horrible. I don't like anything about it. If I only could get out of it.

It's a crummy joint, should be abolished. It's a dirty, filthy place. I was supposed to soak myself in a bathtub for this cyst. Why, I wouldn't get in one of these dirty bathtubs. I had to go down to the Y.

There's bed bugs. Too much noise.

You can't get no rest. You take a chance of gettin' robbed or cut to pieces.

It's quite a bit of drinking and noise on weekends. They don't seem to do much about it. If they tried to stop everybody they wouldn't have anybody here.

I just don't like these flophouses. With me it's a have-to case. Well, I don't go for so much drinkin'. They're harmless, but they're all not clean. But this hotel is as clean as any of 'em.

You hardly ever get clean sheets.

It's dirty and there are drunks and bums bothering you all the time. They make a lot of noise. Always coming around asking for money or telling you stories.

I'll tell you: You get up at night to go to the toilet. You can't find a seat. They're sitting with a gallon of wine drinking. What you gonna like about it? You know how them bird cages are; you heard about 'em.

Group B-2: Attitudes toward Hotels -- Things Liked

I'm well treated, no one bothers me. Always got hot water to take a bath. Always got a towel and the people seem to be 100% courteous. Maid service is excellent; clean sheets and everything.

Here it is fireproof. Other hotels burn up.

There's a good TV set, it's clean, there is plenty of reading material. In general, I'd say it is a little better than the average. It's centrally located, the church is nearby. I've never heard of anyone losing anything in this hotel. Fellows have lost things in quite a few of these other places. As soon as I better myself, naturally I'll move.

It is clean, well managed. I have about a 60-watt bulb and can read. They also grant me rent for 2-3 days if I run out of money. They know I will repay.

I can do my drinkin' here--come in, do what I want--nobody bothers you. Nothing I do like about this hotel. I'm only here because I don't think I could make it someplace else and carry on like I do.

It's the cheapest I can find and close to some friends. Good heat and hot water. More clean than some.

I like the owner. The room is rather clean. There is a kitchen where we can cook some meals. The other tenants are very good people. We are sure the owner is careful not to accept bad tenants. There is nothing wrong for the price I pay.

They have a lounge where you can set down and relax. They have plenty of hot water, where you can shave. The clerks are nice.

I think it is pretty good for the kind it is. I think it is one of the best. It's cheap, good service, clean most of the time.

The bathroom is bigger than most and there are absolutely no bugs. It's still a cage place, though, and not enough privacy.

The hotel is clean and service is good here. They call me in the morning.

It's all right; I got to sleep somewhere. It's a place to sleep in the winter time. It doesn't do me any good to dislike this place.

The hotel is all right. As far as the clerk you were talking to, he's very nice, and the key hop treats me nice. The whole management is nice.

The manager is all right and treats me okay.

I like the cleanliness. If I'm short, they'll carry me for a day or two and let me catch up.

Group B-2: Attitudes toward Hotels -- Things Liked (cont.)

I'm broke. I gotta live. I gotta be in the cheapest place I can. There are some good friends here.

I like it better than some other places. It's got a nice lobby. There's a place in the basement to wash clothes. Shower baths.

It is clean. You are like chickens in a cage. But there are new showers-- the men can keep clean.

It's got the rest of them beat. I prefer this to any other. They keep order, it is quiet, it is clean, they don't allow drunks in here.

This is fireproof and most around here are firetraps.

I like the price--that's the only reason.

It's a place under cover. I mean it's out of the rain. I can't think of another thing, believe me. There ain't enough room to turn around. There's cockroaches, but no bedbugs.

I got no real good room, but it's cheap rents. Got nice old mans live here. Very quiet here. No drunks and robbers (rooming house).

I picked up a woman. She knew the hotel--so I stayed here--she moved out. It's convenient to the jobs I do--the freight docks, etc. I don't like the cockroaches and I do hate having Puerto Ricans next to me.

It's cheap, period.

It's cheap and you can get inside and keep warm and dry.

The rent is reasonable; it's quiet, and the people don't bother me. It's generally pretty clean. I would like better maid service. I wish the room was dusted better and the windows were cleaner (hotel with rooms).

Only thing is that it's cheap and clean. It's very clean and warm in winter. It's cheaper than any other place. I'd rather live someplace else, but can't afford it.



Group C-1: Attitudes toward Other Men on Skid Row -- Things Disliked

They're derelicts--they got loose cogs. Either been in a pen or committed some crime.

They spend their money on wine and have to "carry the banner" we call it. They have to walk the streets or find someplace to stay. I feel sorry for people, but you can't help everybody. Another thing, they are always on the bum.

They're just a bunch of winos. They'll kill you for just a dime, and you've got to be drunk to stand 'em.

They got a bunch of bums around here. They drink in the alleys and pan-handle people on the streets. There's nothing I like about the men on the street.

I don't like the wine heads and undesirable people--those that use dope and stuff. The dope guys and drunks; just keep them off and it would be all right.

The guys don't care what they do. They take everything; just as soon attack you.

There are some pitiful cases down here. They're an awful sight. They could stand some sort of rehabilitation program.

Ninety percent of them just don't care. There's a few who are just down on their luck. They're conscientious guys. As a whole the others just want to drink, get a flop. Don't want to work. What can you do with guys like that? Well, I can't put up with guys like that.

These men don't have respect for property. They don't respect other people's ideas. They are very set in their way of life. The older ones are callous, hard men. Religion for them is mockery. They go to services only to gain something.

They are good men where they are sober, but they are full most of the time.

You've got moochers, drunks, jackrollers. You've got to be careful down here. You can't stay out too late at night.

They're crum-bums down here. My type don't belong here. There's lots of jackrollers. You stay here and you lower yourself deeper and deeper. Just as soon as my arm is well I'll be on my way. The Welfare sent me here. They picked out the hotel and the eating place. Madison Street is where they sent me.

They are all raising hell and drunk. You have to be drunk to get along with them. They are dirty. Nine out of ten of them won't take a job. They want to be bumming.

If you have money you have friends.

Group C-1: Attitudes toward Other Men on Skid Row -- Things Disliked (cont)

I don't like nothing about them, just nothing. I don't want any part of them. They are lone animals--dirty, whiney. I don't associate with anybody.

They are for themselves. Looking from one day to the next to get money from you. These are the younger men. The older pensioners are all right.

They should keep most of these men in their cages. They'll never change. They spit on the floor, throw razor blades on the floor. They're just filthy, crummy. They don't even use the showers. The only nice ones are the old pensioners. Their children are married, so they live here. They don't bother nobody.

They are pitiful people. You can't love them. They kill each other and drink too much and spend the nights in bars and out in the streets. They quarrel too much.

They strong arm you. I've seen as many as four a night right under my window. You can befriend these people but they show no appreciation.

You know the kind of people who live here? Wife deserters, thieves, winos, chronic drunks. They get drunk and want to fight with you. There isn't anything I like about them.

A sane man would like to have other sane men around him. I don't smoke, drink, play cards or horses and that's the kind of people who live on this street.

I don't like the dope fiends in the streets and the jackrollers. I was not raised this way; I don't like this type of people.

They take goofballs, any kind of dope like paregoric--whatever they can get.

The drunkards and the guys that don't work. Also the hillbillies, but they would be all right if they didn't have a chip on their shoulder. They still think they are fighting the Civil War.

A lot of these guys impose on somebody else. All they do is wait for another guy to get his pay check. I don't like it.

They steal. I don't like to be around a bunch like that--they're too rough for me.

Some have crazy ideas--if they have liquor, they don't talk sensibly.

Those type of guys are always driftin'. They go their way and you go yours.

I object to the hillbillies--they jackroll.

I like nothing about the men on Skid Row. They continue drinking every day. They don't consider getting a steady job and getting off. Once down there they stay there year after year. They know they're bums. It's just a low class of people. They are rough, crude, and loud.

Group C-2: Attitudes toward Other Men on Skid Row -- Things Liked

They are just like me. They are every day drunk, and go borrowin' money to buy a bottle. I like 'em. I live with them. They draw their U.C. (unemployment compensation) and they share with others. They are just good guys, that's all. They'll help me when I'm in need. One time one fellow paid my room. I'll pay him back later.

They are pretty good fellows to talk to--they talk about life, politics, working conditions, living conditions, and everything.

The older people are fair and considerate. They are very understanding. They listen to your conversation, will appreciate your conversation.

These are poor working people just like I am. They try to help each other and get along with one another. You got some that are no good for nothing. Some wouldn't work in a pie factory tasting pies. I don't like the sickness here.

I like 'em 'cause I feel they're the underdog. The alcohol is against them--they're like me.

I like the working people and the retired railway men.

They're mostly old ex-soldiers--talk the same language with them. Well, I guess they're just like me. It's a street where everyone helps one another. It's live and let live. We all have a drinking problem.

They'll help each other. If one man's short, another'll help him out.

I like the men; they work.

They're all right. These old pensioners gotta have a place to live. It's better for them here than in an old folks home.

They same like me--have to stay someplace because people here very poor--they have to be here. I got to stay here; can't run away from here now. (Man never drinks; has lived in cubicle hotels for 20 years.)

They're honest workingmen. Been living with them all my life.

There's some nice people here--hard working. They work in the summer and come here in winter. I enjoy talking with them. You got to kill the time.

They are sick fellows and they need help. They want some relief and they get drunk to get it. I like them. When I got money I buy them a drink and they do the same for me.

They're hard luck men and all kinds of 'em. They're extra friendly down here. They've got time to be friendly I guess. We all stick together.

I'd as soon live here as anywhere else. Here you always bump into somebody you know.

Group C-2: Attitudes toward Other Men on Skid Row -- Things Liked (cont.)

Some are hard-working people like me who just try to get along. They don't like it either. They are trying to get by but they work. Some don't work and don't want to work. They would rather rob you or hit you on the head. They are dirty bums.

Well, they feel pretty close to one another. They try to help each other. If one don't have no food, the other will share with him.

Companionship, guys in same shape I am. We're all hurtin'. Lots of 'em is trying to get out, hoping for work. We don't seem to click.

I like the workmen; they're sociable and easy to talk to. Good companions, no false ideas and they're generous. I'm not talking about the parasites. I don't like those who don't and won't work -- always in the taverns looking for a live one with money. They're stem bums.

I like a poor man, because I am poor myself.

They always share what they have with you.

These guys are o.k. They're just down and out like me. They'll help you when you ain't got nuthin'.

There's some good and bad men here. They are tough, but when they get drinking, sometimes they get to fighting. But if you don't bother them they don't bother you. They're pretty nice fellows.

I can be alone. I like to read lots. It's cheap.

They are good fellows, don't bother me. Many are steady workers, not spot laborers.

Lots of 'em work. Don't drink. There's some good men here.

Some of them are fine men. They just don't have a job and are here looking for work. They keep out of trouble and don't drink much. Others aren't good for anything. They're drunk most of the time or they're chasing after women. They can't save their money.

They are all right. I don't mix with them. I only say hello to them. I don't like to see them drunk.

You take a man that's sober. They've had lots of interesting things in their lives. As a general rule they come from nice Christian homes. Some of 'em have had upsets in their lives and got to drinking to drown their sorrows. The general run is good when they're sober.

The only answer I can give you is we're all alkie (alcoholics). Birds of a feather flock together.

Group D-1: Why Respondent has no Friends

You have plenty of friends as long as you have money. When you run out of money you ain't got friends. I don't want no friends, always on you, "gimme", "have you got".

Oh, I ain't got no friends, just people I know. Well, you know how it is; everybody likes to be by themselves.

You can't trust them or believe them. All they want is your money.

They are just acquaintances. They try to be friendly, but they don't mean it. They only try to get something out of you.

Because I've been exclusive for three or four years. My wife died; my son is in the hospital injured during the war. So I felt like staying by myself with my books.

I don't want any friends. They're drunk all the time; you can't trust any of them.

I never tried to make any friends. Don't want them for my friends. 'Cause they're winos. It would cost me too much money.

I don't know (why has no friends). That's human nature.

You can sit around and talk but you couldn't make a real friend down here, someone you could depend on. You can never trust a drunk. I ought to know (laughs). I'm one.

You can't be friends down there. All they want to know is if you got enough to buy a jug.

I'm not here long enough to make friends.

No, I wouldn't say close friends. I have close friends in other parts of Chicago. But some of 'em are good company. I never get too personal with them. You know, talk to 'em, invite 'em to the room. Have a glass of beer with them.

Group D-2: How Friends are Different from Other Skid Row Men

The men I know don't meddle with the rotten class. They can hold a straight conversation. They talk intelligently. The others don't have any respect for themselves or anybody else.

One is an engineer and another's well educated but down on his hub.

Yes, they are cleaner, take care of themselves. They will loan you money. You can talk sensibly to them. They are not drunk all the time.

If you need a dollar they will give you a dollar. They don't throw their money away. They will help you out in a pinch.

One works for the State Employment Office. He gets me out (to work) every time he can.

They lead a respectable life, even if they are on the street. They just take a social drink.

We talk about business. My friends work. We advise each other and help each other.

They believe in working. We borrow money from each other. You can't do this with other people.

They talk sense. Well, they act their age. They're normal.

They don't drink. They don't mess around. We go to the show or we sit here and watch television or maybe have a card game.

Well, they're cleaner, are willing to work, are more sensible to talk to. Maybe the rest would be too, if they sobered up.

Yes, they are different; they don't drink so much.

My friends will work. There are many men here who would not even look for work. My friends at least have a little common decency left, morally speaking.

Older type. More different than younger type. Middle age men don't monkey in other people's business, takes care of his own. Easy to get along with.

## Chapter 6

### PROBLEM DRINKING AND ALCOHOLIC DERELICTION ON SKID ROW

Obtaining a clear picture of the drinking behavior of homeless men and developing an understanding of the kinds of motives upon which drinking is based are among the principal objectives of this study. The present chapter begins the analysis of drinking behavior among homeless men. Later chapters will add to the materials presented here, as each of the chapter topics is discussed in relation to the drinking problem.

#### A DRINKING CLASSIFICATION OF THE HOMELESS MEN

It would be naive to rely solely upon the responses of the men to the question, "How heavy do you drink?" as a basis for classifying them according to their drinking behavior. What is "light drinking" to one may be "heavy drinking" to another. In addition to this question, they were asked several additional questions which, when assembled, permit each person to be given a classification that, it is believed, rather accurately fits his drinking behavior.<sup>1</sup> Each respondent was placed into one of five classes:

Teetotaler -- a person who said he never drinks and for whom there was no evidence to controvert his claim, including the observations of the interviewer.

Light drinker -- a person who says he is a light drinker and who spends less than 15 percent of his income on drinking, and who drank less than 3 pints of whisky (or equivalent) during the week preceding the interview. Also included are persons who said they were moderate drinkers, but who drank less than 2 pints during the preceding week and spend not more than 10 percent of their income on drinking.

Moderate drinker -- a person who says he is a moderate drinker and who spends between 15 and 35 percent of his income on drinking and who drank not more than 5 pints of whisky (or equivalent) during the week preceding the interview. Also included are men who called themselves "light drinkers" but who spend 20 to 40 percent of their income on drinking, men who call themselves "heavy drinkers" but who spend less than 20 percent of their income on drinking and drank less than 5 pints in the preceding week, or periodic drinkers whose spells of drinking are spaced 3 or more months apart and who spent less than 35 percent on drinks.

Heavy drinker -- a person who says he is a heavy drinker and spends 25 percent or more of his income on drinking or who drank 6 or more pints of whisky (or equivalent) during the week preceding the interview, or who says he is "light" or "moderate" drinker but spends 40 percent of his income on drinking and drank more than 5 pints of whisky (or equivalent) in the week preceding the interview.

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<sup>1</sup>The classification was based upon the following interview items: "About how much

Alcoholic derelict -- a long-time heavy drinker who has sacrificed almost everything for drinking. These men qualified as heavy drinkers and in addition have been arrested at least 10 times for drunkenness (one of which times was in the last six months), and who also have one of the following: (a) a health condition attributable to prolonged drinking, (b) has had D.T.'s one or more times, (c) spends 65 percent or more of their income on drinking, (d) has been in the hospital one or more times as a result of drunkenness. If there was no record of jail or arrests, a heavy drinker was classified as an alcoholic derelict if he had 2 or more of the conditions listed above that did not refer to the same episode of drunkenness.

In those cases where the combinations of characteristics could not give a clear-cut and internally consistent classification, the interview was re-read and the man was allocated in the group that fitted his behavior most nearly on the basis of all information in the interview, including the observations of the interviewer. In other words, the classification was based upon all information that could be obtained from a rather varied and thorough probing concerning drinking behavior. This classification will be used throughout the remainder of the report as the best available evidence concerning drinking behavior. The proportion of the sample that fell in each category, and the number of homeless men on Chicago's Skid Rows these proportions imply, are as follows:

<u>Drinking classification</u>	<u>Percentage of men in the sample</u>	<u>Number of homeless men on Skid Row</u>
Total. . . . .	<u>100.0</u>	<u>11,926</u>
Teetotalers. . . . .	14.8	1,765
Light drinkers . . . . .	28.4	3,375
Moderate drinkers. . . . .	24.4	2,910
Heavy drinkers . . . . .	19.9	2,373
Alcoholic derelicts. . . . .	12.6	1,503

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of the money you get do you spend on drinking?" "Do you have spells when you drink very heavy?" "How often do you have these spells?" "Why do you suppose you drink more at those times than at others?" "What do you usually drink?" "Do you usually buy at a bar or do you usually buy a bottle?" "About how many days last week did you have some wine or whisky or beer to drink?" "About how much did you drink in one day?" "Do you ever feel like you have to take a drink in the morning just before or after breakfast?" "About how many times would you say you have been arrested for being drunk?" "And how many of these times were you sentenced to jail?" "Have you ever been hospitalized for drunkenness or as a result of being drunk?" "How many times, if any, have you had the D.T.'s?"



## CHARACTERISTICS OF HEAVY AND LIGHT DRINKERS

Table 6-1 presents data which show how men who fall into each of the five drinking classifications differ from each other.

Age. If a very young man lives on Skid Row, there is a high probability that he is a heavy drinker, but if he is very elderly, there is a much better chance that he is a teetotaler or light drinker. For example, among men 20-44 years of age, more than 45 percent are either alcoholic derelicts or heavy drinkers, but among men 55 or over, between 55 and 60 percent are teetotalers or only light drinkers. At least three explanations may account for this: (a) young men tend not to come to Skid Row unless they have a drinking problem; (b) those who drink most heavily tend to die prematurely, and hence there are not many elderly alcoholics; (c) men who do not drink heavily and dislike Skid Row are not forced to live here until they become older and are no longer able to earn enough to live somewhere else. The younger age composition of the group of men who drink most heavily is evident from the following summary:

<u>Drinking classification</u>	<u>20 to 44 years</u>	<u>45 to 64 years</u>	<u>65 years or over</u>	<u>Total</u>
Alcoholic derelicts. . .	42	55	3	100
Heavy drinkers . . . . .	47	49	4	100
Moderate drinkers. . . .	36	46	18	100
Light drinkers . . . . .	25	52	23	100
Teetotalers. . . . .	21	42	37	100

Nevertheless, some teetotalers (21 percent) are young. But only a very small percentage of the alcoholic derelicts or heavy drinkers are 65 years of age or over. Evidence to be presented in the next chapter suggests that this is due in no small part to the lethal effects of heavy drinking.

Education. On Skid Row, the men with the most education tend to be the heaviest drinkers, while the men with the least education tend to be teetotalers or only light drinkers in a higher percentage of cases. Although much of this relationship is due to the age relationship described above (younger people tend to have more years of formal schooling than older), even when the effect of age is controlled, there is a tendency for a higher percentage of educated homeless men on Skid Row to be heavy drinkers. Apparently this is due to the fact that uneducated men have two reasons for being on Skid Row--personal disorganization and poverty--whereas most of the more educated men have only one reason for being there--personal disorganization.

Marital status. Widowed men on Skid Row tend to be teetotalers or light drinkers, whereas divorced or separated men tend to be heavy drinkers. A substantial proportion of single men fall in each of the drinking classifications.

Employment status. The teetotaler on Skid Row tends to be a man who is unable to work. The light drinker or moderate drinker tends to be a man with a steady job; the heavy drinker tends to be a spot job workers or an unemployed workman; while the alcoholic derelict tends to report himself either as "not caring to work" or

as unemployed. These relationships are evident both in table 6-1 and in the following summary of the employment status of the upper and lower extremes of the drinking scale:

<u>Employment status</u>	<u>Alcoholic derelicts and heavy drinkers</u>	<u>Teetotalers and light drinkers</u>
Total . . . . .	<u>100</u>	<u>100</u>
Employed--steady job . . . . .	18	21
Employed--spot jobs . . . . .	23	15
Unemployed . . . . .	29	18
Unable to work . . . . .	10	32
Did not care to work . . . . .	14	8
Temporarily ill . . . . .	5	6

Note in the above summary that among teetotalers and light drinkers, the percentage of persons with steady jobs outnumbers the percentage with spot jobs by the ratio of about 4 to 3. But among heavy drinkers and alcoholic derelicts, spot job holders outnumber those with steady jobs in the ratio of about 6 to 5. However, it should not be overlooked that some spot job workers are teetotalers or light drinkers and that a substantial proportion of the men who drink heavily also hold steady jobs. Thus, one cannot declare that there is a one-to-one relationship between heavy drinking and irregularity in employment.

Pension status. A higher percentage of the pensioners than of any other group are rated as teetotalers or light drinkers, whereas the greatest percentage of alcoholic derelicts are found among those drawing temporary unemployment compensation and among the general non-pension population. However, it would be completely incorrect to claim that none of the old-age and other pensioners have a drinking problem. Almost one fourth of the homeless men on General Public Assistance were classified as heavy drinkers or alcoholic derelicts, and almost one fifth of those on Social Security or other pensions were classified as heavy drinkers or alcoholic derelicts. The agencies whose responsibility it is to care for familyless pensioners have a very difficult task to keep some of them from swapping disbursing orders for food and lodging for wine and whisky.

Occupation. The heaviest drinkers, when employed, tend to be concentrated in the service trades. The largest single source of employment for this group is restaurants--food handling, dish washing, and clean-up work. A high percentage of heavy drinkers are laborers, although comparatively few alcoholic derelicts fall in this group--presumably because of their poor physical condition. The percentage of heavy drinkers and alcoholic derelicts classed as clerical or sales workers is considerably smaller than for the other occupations.

Residence. There is a sharp residential differentiation between heavy and light drinkers. Men who live in cubicle hotels are much heavier drinkers, on an average, than men who live in single rooms, either in rooming houses or in hotels with single rooms. Men living in rooming houses in the Skid Row neighborhood are especially inclined to be teetotalers. Men who are staying in Missions, jails, hospitals, or sleeping out tend to be unusually heavy drinkers, because their drinking is one factor in their place of residence.

Alcoholic derelicts are found on all of Chicago's Skid Rows, but by far the largest share are found on West Madison Street, where one man in three is a heavy drinker and where one in six is an alcoholic derelict. The least alcoholism is found along the North Clark Street area, where more than one fourth of the men are teetotalers and an additional one third are only light drinkers. An intermediate degree of alcoholism is found along South State and the South Clark-Van Buren Street areas.

Veteran status. Men with no military service tend to be light or moderate drinkers, whereas an above-average percentage of the men who claim veteran status tend to be heavy drinkers or alcoholic derelicts. World War II veterans appear to be especially inclined toward alcoholism; 54 percent of such veterans are either heavy drinkers or alcoholic derelicts. In contrast, World War I veterans are much less inclined to be heavy drinkers. This may be due to the fact that the heavier drinkers among this group had already died off before the time of the interviews.

Nativity and Race. It is not the foreign born, or even the children of foreign-born people who are most heavily concentrated in the ranks of alcoholic derelicts and heavy drinkers. Instead, it is native born white persons whose parents are also native born. Of such "third generation Americans" on Skid Row, 43 percent were either alcoholic derelicts or heavy drinkers. The foreign born were least inclined toward alcoholism--only 16 percent were heavy drinkers or derelicts. Negroes living on Skid Row also are much less inclined toward excessive drinking than any white group except the foreign born. The heaviest drinkers of all, however, were the Indians. More than one half of the Indians living on Skid Row were heavy drinkers, and more than one fourth were alcoholic derelicts.

Nationality. A higher percentage of the men with Irish, Scotch-Irish, French, and Scandinavian ancestry than of men with other nationality backgrounds who live on Skid Row are either alcoholic derelicts or heavy drinkers. On the other hand, the group of homeless men who are least inclined to be alcoholic are those of Italian, Polish, other eastern and southern European, and Mexican descent. Germans, English, etc., seem to occupy an intermediate position between these extremes.

It must be emphasized that these data refer only to the nationality composition of the men who live on Skid Row. One cannot tell from these statistics whether one nationality group among the general population is more inclined to be alcoholic than another.

Place of birth of native born. The men on Skid Row who were born in metropolitan areas are considerably more inclined to be derelicts or heavy drinkers than those born in nonmetropolitan areas. This may be verified in table 6-1 by comparing the percentages of those born in metropolitan and nonmetropolitan areas, region by region.

Men who were born in the South are more inclined to be heavy drinkers or alcoholic derelicts than men born in other regions. This is true both for southerners born in metropolitan and those born in nonmetropolitan areas of the South.

The light drinkers and teetotalers were born primarily in the nonmetropolitan sections of the northeastern states and the north central states, and in the metropolitan section of Illinois (which is primarily Chicago).

## SUMMARY AND IMPLICATIONS

At least one half of the residents of Skid Row are either teetotalers or else men who drink in a controlled manner, whereas the other 40-50 percent are alcoholic derelicts or heavy drinkers, and moderate drinkers who soon may become heavy drinkers. This strengthens the conclusion that there are two kinds of homeless men on Skid Row--the men who are here primarily because they are disorganized and have a drinking problem and the men who are here primarily because they are poor and do not have enough income to live any place else. If one tried to build up a composite picture of each of these groups using the evidence presented in this chapter, his results might be as follows:

Group A -- Homeless men who live on Skid Row because they are poor. (Roughly 4,500 to 6,000 men in Chicago.) These men have accumulated from the most poverty-stricken segments of Chicago and the nation. Many of them are old men who live on very small pensions (Social Security, military pensions, or public welfare). Others are the least educated, most unskilled, and least employable men in the labor force and hence the ones who have "lost out" in the competition for better jobs. Many are immigrants from Europe who "failed to make good" and who have reconciled themselves to living on Skid Row. Here also are the nonalcoholic Negro from the South who has been unable to find work, and the widowed old man who has no relatives with whom he can live and who is no longer able to work. Here are the men who have steady employment, but at jobs that pay substandard wages. The migrant worker who has come to the city to find work, who has exhausted his funds and is taking spot jobs or just any jobs to get along, is also in this group.

These men who control their drinking are not necessarily "lost souls" in the sense used by the mission preacher whose sermons about repentance they endure in order to eat, but tend to be "lost souls" economically, in the sense that at the present time they can only look forward to a life of economic hardship. They are the men hardest hit by inflation, the losers in the competition for steady jobs, and those who got consolation prizes when the steady jobs were handed out. At this stage of the analysis it is impossible to say why they are on Skid Row--whether they are innocent victims of circumstance or whether they got here because of incompetence, laziness, ignorance, some abnormal personality traits, or other reasons. However, it is certain that at least one half of Skid Row's residents are not alcoholic addicts. Many of those who are now light or moderate drinkers may eventually become heavy drinkers.

Group B -- Homeless men on Skid Row who are alcoholic derelicts or heavy drinkers. These are young or middle-age men who are irregularly employed, either as spot job workers, as railroad maintenance men who draw "rocking chair" or other unemployment compensation, or those who just beg other homeless men for drinks and live off the missions. A small percentage qualify for public assistance, but use as much of their living allowance for drinking as they can manage to convert. They tend to be native born Americans whose parents were native born--and a disproportionately high percentage

of them are of Irish ancestry and come either from the South or from a metropolitan area. As will be shown in a later chapter, a large percentage are in good physical health, except for the more or less temporary condition induced by their excessive drinking, and could be physically rehabilitated to be either only slightly handicapped or not handicapped at all. But they would still be left with their drinking problem unresolved.

Table 6-1: Drinking Classification of Homeless Men on Chicago's Skid Rows, by Selected Characteristics: 1958.

Variable	Drinking classification					Percent Distribution	
	Dere- lict	Heavy	Mode- rate	Light	Never	Across	Down
Total . . . . .	12.6	19.9	24.4	28.4	14.8	100.0	100.0
<b>A. TYPE OF RESIDENCE</b>							
Large cubicle-type hotel (300 cubicles or more). . . . .	15.9	25.6	21.5	25.6	11.3	100.0	34.1
Medium-size cubicle hotel (200-300 cubicles) . . . . .	13.4	19.5	25.6	29.3	12.2	100.0	14.3
Small Cubicle hotel (less than 200 cubicles) . . . . .	9.2	13.3	34.7	26.5	16.3	100.0	17.1
Hotel with rooms (not cubicles). . . . .	5.0	5.0	28.5	42.1	19.4	100.0	14.1
Rooming house. . . . .	2.9	5.7	17.1	42.9	31.4	100.0	6.1
Mission. . . . .	16.7	33.3	19.0	17.9	13.1	100.0	9.8
Hospital . . . . .	10.0	40.0	10.0	10.0	30.0	100.0	1.2
Jail . . . . .	52.9	29.4	11.8	5.9	...	100.0	2.0
Sleeping out . . . . .	...	54.5	9.1	27.3	9.1	100.0	1.3
<b>B. AREA OF RESIDENCE</b>							
West Madison . . . . .	15.6	20.4	23.6	27.2	13.3	100.0	71.6
South Clark and Van Buren. . . . .	2.8	27.8	22.2	30.6	16.7	100.0	6.3
North Clark. . . . .	3.0	11.0	27.0	33.0	26.0	100.0	5.8
South State. . . . .	6.6	17.5	27.6	31.9	16.3	100.0	15.0
Other. . . . .	8.7	21.7	26.1	21.7	21.7	100.0	1.3
<b>C. AGE</b>							
20-29 years. . . . .	20.0	26.0	22.0	22.0	10.0	100.0	5.8
30-34 years. . . . .	14.9	25.8	23.2	28.9	7.2	100.0	11.3
35-39 years. . . . .	17.4	28.6	31.5	16.4	6.1	100.0	12.4
40-44 years. . . . .	14.7	29.9	23.4	24.8	7.2	100.0	16.2
45-49 years. . . . .	19.4	19.8	21.5	29.1	10.1	100.0	13.2
50-54 years. . . . .	13.9	10.2	30.5	26.2	19.3	100.0	10.9
55-59 years. . . . .	5.6	12.7	14.8	47.2	19.7	100.0	8.3
60-64 years. . . . .	1.9	5.7	34.0	31.4	27.0	100.0	9.3
65-69 years. . . . .	2.1	4.3	14.2	44.0	35.5	100.0	8.2
70 and over. . . . .	6.7	32.0	24.0	14.7	22.7	100.0	4.4

Table 6-1: Drinking Classification of Homeless Men on Chicago's Skid Rows, by Selected Characteristics: 1958 (continued)

Variable	Drinking classification					Percent Distribution	
	Dere- lict	Heavy	Mode- rate	Light	Never	Across	Down
Total . . . . .	12.6	19.9	24.4	28.4	14.8	100.0	100.0
<b>D. EDUCATIONAL ATTAINMENT</b>							
None or less than 5 years . . . . .	9.6	7.2	13.7	41.9	27.5	100.0	17.0
Grammar school: 5-7 years . . . . .	16.5	15.7	19.3	33.6	14.8	100.0	20.8
Grammar school: 8 years . . . . .	11.8	22.4	28.5	25.3	12.1	100.0	19.8
High school: 1-3 years . . . . .	12.1	26.7	25.0	28.2	8.0	100.0	20.3
High school: 4 years . . . . .	12.5	29.9	25.4	15.2	17.0	100.0	13.1
College: 1-4 years . . . . .	19.6	25.8	21.6	21.6	11.3	100.0	5.7
No information . . . . .	...	5.1	79.7	10.2	5.1	100.0	3.4
<b>E. MARITAL STATUS</b>							
Single (never married) . . . . .	11.4	18.6	19.5	33.9	16.6	100.0	43.1
Separated . . . . .	15.4	25.6	23.8	22.3	12.8	100.0	15.9
Divorced . . . . .	16.0	26.3	23.6	23.0	11.1	100.0	28.4
Widowed . . . . .	5.1	2.8	34.8	33.7	23.6	100.0	10.4
No information . . . . .	7.9	...	84.2	7.9	...	100.0	2.2
<b>F. EMPLOYMENT STATUS</b>							
Employed -- Steady job . . . . .	8.0	18.9	30.7	31.7	10.7	100.0	21.9
Employed -- Spot job . . . . .	8.4	33.1	22.1	23.4	13.0	100.0	17.9
Unemployed, applied for work . . . . .	15.2	24.9	26.4	26.4	7.0	100.0	23.4
Unable to work . . . . .	6.7	8.8	21.4	33.2	29.8	100.0	21.7
Did not care to work . . . . .	41.3	9.7	12.3	23.2	13.5	100.0	9.0
Temporary illness . . . . .	9.6	19.2	28.8	28.8	13.5	100.0	6.1
<b>G. PENSION STATUS</b>							
Not a pensioner . . . . .	11.9	24.4	24.4	25.8	13.5	100.0	51.9
Pensioner - General Public Assistance (welfare) . . . . .	9.8	13.9	20.9	37.0	18.4	100.0	18.4
Pensioner - Retirement . . . . .	6.6	11.3	23.7	33.9	24.5	100.0	15.0
Temporary pensions - unemployment compensation . . . . .	27.9	20.2	30.6	17.5	3.8	100.0	10.7
No information or evaluation impossible . . . . .	15.7	20.0	25.7	30.0	8.6	100.0	4.1
<b>H. OCCUPATION</b>							
Clerical, sales . . . . .	7.8	19.6	35.3	31.4	5.9	100.0	5.9
Craftsmen and Operatives . . . . .	9.0	27.0	23.8	23.8	16.4	100.0	7.1
Service workers . . . . .	11.0	21.6	31.1	25.4	11.0	100.0	15.4
Laborers . . . . .	4.2	32.8	18.7	31.2	13.0	100.0	11.2
Occupation not reported . . . . .	...	...	50.0	50.0	...	100.0	0.3
Not employed last week . . . . .	15.5	16.3	22.5	28.7	16.9	100.0	60.0

Table 6-1: Drinking Classification of Homeless Men on Chicago's Skid Rows, by Selected Characteristics: 1958 (continued)

Variable	Drinking classification					Percent Distribution	
	Dere- lict	Heavy	Mode- rate	Light	Never	Across	Down
Total . . . . .	12.6	19.9	24.4	28.4	14.8	100.0	100.0
<b>I. INCOME PER YEAR</b>							
Less than \$750 . . . . .	12.0	16.8	28.8	30.6	11.8	100.0	22.3
\$750 to \$999 . . . . .	12.4	14.2	16.3	37.9	19.2	100.0	19.7
\$1,000 to \$1,499 . . . . .	14.3	23.7	24.4	27.8	9.8	100.0	15.5
\$1,500 to \$2,499 . . . . .	17.9	22.6	26.7	23.0	9.8	100.0	17.2
\$2,500 and over . . . . .	10.7	29.4	21.3	22.1	16.5	100.0	15.9
No information . . . . .	4.9	11.7	31.5	24.7	27.2	100.0	9.4
<b>J. VETERANS STATUS</b>							
No military service . . . . .	8.6	15.5	20.6	38.4	16.8	100.0	46.6
Military service: before World War II.	9.5	9.5	27.3	31.6	22.1	100.0	17.8
World War II . . . . .	20.1	33.8	22.0	16.5	7.6	100.0	25.2
After World War II . . . . .	13.3	17.1	29.5	16.2	23.8	100.0	8.1
No information . . . . .	10.0	30.0	50.0	10.0	...	100.0	2.3
<b>K. RACE, NATIVITY, PARENTAGE</b>							
Native born, both parents native . . .	16.5	26.4	23.7	24.9	8.4	100.0	42.8
Native born, father native born-- mother foreign born . . . . .	8.3	30.0	25.0	28.3	8.3	100.0	3.5
Native born, mother native born-- father foreign born . . . . .	11.2	27.5	11.2	28.8	21.2	100.0	4.7
Native born, both parents foreign born	12.4	16.0	24.2	27.8	19.7	100.0	20.7
Foreign born . . . . .	5.4	10.1	21.4	38.1	24.9	100.0	15.0
Negro . . . . .	7.6	7.0	34.8	32.3	18.4	100.0	9.2
Indian . . . . .	27.5	25.0	7.5	32.5	7.5	100.0	2.3
Nativity unknown . . . . .	...	9.7	67.7	9.7	12.9	100.0	1.8



Table 6-1: Drinking Classification of Homeless Men on Chicago's Skid Rows, by Selected Characteristics: 1958 (continued)

Variable	Drinking classification					Percent Distribution	
	Dere- lict	Heavy	Mode- rate	Light	Never	Across	Down
Total . . . . .	12.6	19.9	24.4	28.4	14.8	100.0	100.0
<b>L. NATIONALITY OF FATHER</b>							
England, Scotland, Wales, Canada. . .	17.6	22.5	17.6	31.6	10.7	100.0	14.2
Ireland . . . . .	14.6	27.6	21.6	20.3	15.9	100.0	18.4
Scandinavia . . . . .	14.2	22.6	30.2	21.7	11.3	100.0	6.2
Netherlands, Belgium. . . . .	21.4	10.7	46.4	21.4	...	100.0	1.6
France. . . . .	34.9	11.6	14.0	25.6	14.0	100.0	2.5
Germany, Austria. . . . .	15.2	20.6	23.3	25.7	15.2	100.0	15.0
Poland. . . . .	7.2	20.9	17.6	33.3	20.9	100.0	8.9
Eastern Europe. . . . .	3.3	9.0	26.2	38.5	23.0	100.0	7.1
Southern Europe . . . . .	...	14.3	17.1	42.9	25.7	100.0	2.0
Mexico. . . . .	4.2	...	25.0	60.4	10.4	100.0	2.8
Scotch-Irish. . . . .	8.9	35.7	41.1	10.7	3.6	100.0	3.3
Negro or Indian . . . . .	8.0	12.0	31.4	30.3	18.3	100.0	10.2
Other and unknown . . . . .	11.9	18.7	30.6	29.1	9.7	100.0	7.8
<b>M. PLACE OF BIRTH OF NATIVE BORN</b>							
Born in metropolitan areas. . . . .	15.8	21.0	23.7	25.6	13.9	100.0	44.6
Northeastern states. . . . .	18.3	14.5	27.5	20.6	19.1	100.0	7.6
North Central states, except Illinois . . . . .	13.0	24.8	21.1	32.3	8.7	100.0	9.4
Illinois . . . . .	10.2	21.3	24.1	29.2	15.2	100.0	18.4
South. . . . .	28.8	18.2	26.5	14.4	12.1	100.0	7.7
West . . . . .	23.1	42.3	...	23.1	11.5	100.0	1.5
Born in nonmetropolitan areas . . . . .	12.1	23.1	24.1	28.4	12.3	100.0	38.9
Northeastern states. . . . .	4.8	19.0	26.2	35.7	14.3	100.0	2.4
North Central states, except Illinois . . . . .	9.3	22.8	29.1	24.1	14.8	100.0	13.8
Illinois . . . . .	15.0	21.7	30.0	20.0	13.3	100.0	3.5
South. . . . .	15.4	25.3	19.5	29.5	10.3	100.0	17.0
West . . . . .	8.1	13.5	16.2	54.1	8.1	100.0	2.2
No information. . . . .	...	...	100.0	...	...	100.0	1.2
Foreign born. . . . .	5.3	9.9	21.0	38.5	25.2	100.0	15.3

## Chapter 7

### DEATH ON SKID ROW\*

In order to study how strong the force of mortality is among the homeless men of Skid Row, in comparison with the population at large, the death records of the City of Chicago for the three years 1955-57 were analyzed. A listing of cubicle-type hotels, with names and addresses, was submitted to the Chief Statistician for the City of Chicago, who searched the death records for the three years and isolated all instances of death that had occurred to persons living at each of these addresses at the time of death. These death records were then tabulated to show the age, color, and other characteristics for the decedents. Using information from the sample interviews, an estimate was prepared of the average number of men living at this identical set of addresses during the three year period. Death rates were computed by dividing the deaths by the estimated resident population.

Skid Row men living in cubicle-type hotels are subject to death rates that are almost unbelievably high. Death rates of the magnitude calculated for Skid Row never have existed among the general population at any time in the nation's history. They are even higher than the mortality rates of India, Africa, and other places where the level of medical care is very low.

A first measure of the very great toll that death takes on Skid Row is given by the general death rate. In 1956, the general death rate among white males in the United States was 10.8 deaths per 1000 residents; among white males living in cubicle-type hotels in Chicago in 1957 it was 70.0, or more than 6 1/2 times as large. A part of this difference could result from differences in age composition, however. A more exact way of making the comparison is to construct a life table for the Skid Row population and to compare the life expectancy at each age with the similar value for U. S. white males. Table 7-1 is such a life table computed for the Skid Row population, using the mortality data obtained from the special tabulations. Column 7 of this table reports the average years of life remaining to a resident of Skid Row. Table 7-2 reports the average number of years of life remaining to the average U. S. white male, and column 3 of that table shows what percentage the life expectancy of the Skid Row white male is of the life expectancy of the U. S. average male. The full impact of mortality upon the Skid Row population may be summarized by saying that at most ages, Skid Row inhabitants may expect to live less than one half as long as the general population of the same age. For example, the average U. S. white male aged 50-54 may look forward to 23 additional years of life, but on Skid Row a typical resident of this age may expect to live only 10.6 years, or only 46 percent as long. Similar differences are present for all ages, with the differential becoming steadily more unfavorable, with increasing age, toward the survival of dwellers in cubicle-type hotels. For purposes of comparison, the life expectancy at selected ages is shown for India and the male African population of the Belgian Congo. In every case, the death rates of Skid Row compare unfavorably with the death rates of these "underdeveloped" countries.

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\*This section of the report is based upon data obtained from special tabulations of death records. The generosity of the Chicago Board of Health, Herman N. Bundeson, President, and the hard work (piled atop regular operations) of Frank Bower, Chief Statistician and Marvin Templeton, Assistant Chief Statistician for preparing these tabulations are gratefully acknowledged.

Table 7-1: Abridged Life Table for White Males Living in Cubicle-type Hotels in Chicago, 1955-1957.

AGE INTERVAL	PROPORTION DYING	OF 100,000 BORN ALIVE		STATIONARY POPULATION		AVERAGE REMAINING LIFETIME
		Number living at beginning of age interval	Number dying during age interval	In the age interval	In this and all subsequent age intervals	Average number of years of life remaining at beginning of age interval
x to x + 5	${}^5q_x$	$l_x$	${}^5d_x$	${}^5l_x$	$T_x$	${}^0e_x$
20-24.....	.036857	100,000	3686	491,467	3,209,397	32.09
25-29.....	.041676	96,314	4014	472,235	2,717,930	28.22
30-34.....	.048866	92,300	4510	451,000	2,245,695	24.33
35-39.....	.062619	87,790	5497	426,124	1,794,695	20.44
40-44.....	.098253	82,293	8086	392,524	1,368,571	16.63
45-49.....	.186721	74,207	13,856	337,951	976,047	13.15
50-54.....	.304142	60,351	18,355	256,713	638,096	10.57
55-59.....	.333956	41,996	14,025	175,312	381,383	9.08
60-64.....	.447585	27,971	12,519	107,922	206,071	7.37
65-69.....	.481276	15,452	7437	58,102	98,149	6.35
70-74.....	.575802	8015	4615	27,801	40,047	5.00
75-79.....	.722443	3400	2456	10,049	12,246	3.60
80-84.....	.884675	944	835	2088	2197	2.33
85 and over..	1.000000	109	109	109	109	1.00

Table 7-2: Life Expectation of White Males Living in Skid Row Cubicle-type Hotels in Comparison with White Males in the U. S. General Population and Males of Selected "Underdeveloped" Countries.

Age	Years of life remaining:				
	White males, U. S., 1956	White males, Skid Row, 1955-57	Skid Row as percent of U. S.	Males, India 1941-50	Males, Belgian Congo African Population 1950-52
20-24 years . . . . .	50.1	32.1	64	31.4	32.8
25-29 years . . . . .	45.5	28.2	62	28.2	29.5
30-34 years . . . . .	40.9	24.3	60	25.0	26.1
35-39 years . . . . .	36.2	20.4	57	22.0	23.0
40-44 years . . . . .	31.6	16.6	53	19.1	20.0
45-49 years . . . . .	27.3	13.2	48	16.3	17.0
50-54 years . . . . .	23.1	10.6	46	13.6	14.3
55-59 years . . . . .	19.3	9.1	47	11.3	11.8
60-64 years . . . . .	15.9	7.4	46	9.2	9.6
65-69 years . . . . .	12.9	6.4	49	7.3	7.5
70-74 years . . . . .	10.3	5.0	48	5.8	5.6
75-79 years . . . . .	7.9	3.6	46	4.6	4.0
80-84 years . . . . .	6.0	2.3	39	3.5	2.8
85-89 years . . . . .	4.7	1.0	21	...	...

Source of comparative data: National Office of Vital Statistics, Vital Statistics of the United States, 1956, page xcii. United Nations, Demographic Yearbook, 1956, pages 734-5 and 738-9.

This finding is made more impressive by the fact that the death statistics upon which the above findings are based are almost certain to be severely incomplete. Deaths were included in the tabulations only where the decedent could be definitely allocated to a specific address. Skid Row men without a permanent place to stay, who died out-of-doors or who were found wandering the streets in a condition of serious illness and rushed to a hospital where they died, would not be included in these tabulations. One can only speculate on how much higher the true Skid Row death rate actually is than the values shown here.

Circumstances of death. It could conservatively be estimated that about one half of the Skid Row deaths occur without benefit of medical attention immediately preceding the terminal illness. This is indicated by at least two items of information. First, only 39 percent of the 1012 death certificates allocated to the cubicle-type hotels in the years 1955-57 were signed by an attending physician; the remainder were certificates issued through the Coroner's office. Second, almost one half of all deaths occur under circumstances that make it appear that medical attention had not been given or arrived too late. The deaths of the Skid Row men occurred in the following places:

Total, percent . . . . .	100
<u>Probably with little or no medical care . . . . .</u>	<u>52</u>
Died in the cubicle . . . . .	42
Died en route to hospital . . . . .	5
Place of death unspecified . . . . .	5
<u>Probably with some medical care . . . . .</u>	<u>48</u>
Died in Cook County hospital . . . . .	39
Died in other hospital or convalescent home . . . . .	6
Died in jail . . . . .	3

From general conversations with long-time workers in the area the information on the death certificates fit what seem to be the facts: in a high percentage of cases the men who are not on General Public Assistance or some other pension program that guarantees them minimum medical care simply are found dead in their cubicles by the maids when they clean in the morning, and the bodies are turned over to the police. At the Monroe Street Station, one officer is kept almost continuously busy trying to locate relatives and attending to other matters incidental to deaths of this kind. One of the resource persons interviewed was a police officer who had spent many years at this kind of work. Interviews with hotel managers revealed some rather heart-breaking stories of unsuccessful efforts to get a physician to visit residents who had lived in the hotel for several years and who were known. Welfare rules prohibit such a visit unless the man is a regular welfare client. A private physician would knowingly be performing an act of charity if he responded to a call to such an address. Often, the hotel manager himself calls the doctor for a man who has been a long-term customer, and pays for the doctor's visit. Sometimes a man's friends will "chip-in" to get enough money to get a doctor. However, if the man is unknown in that hotel, there is almost nothing he can do to get medical aid. Alone, with his family not knowing where he is, without enough money, and in a situation where death is almost a weekly annoyance (because it means calling the police), the down-and-out stranger is helpless. There is no law that requires anyone to give him emergency aid, and there is no systematic program of private charity to help him. All too often the death is needless. For example, a single shot of antibiotics might give

a sick man a fighting chance against pneumonia. It may be difficult for a dying man to excite any attention on Skid Row; death sounds are not too dissimilar from the noises of common drunkenness.

Cause of death. Because of the circumstances surrounding their death (lack of prior medical attention), the cause of death frequently is unknown or only vaguely defined. Unless an autopsy is performed (and in most cases an autopsy is not performed upon homeless men found dead), the cause of death cannot be stated exactly; the coroner (or his representative) makes the best possible guess from external evidence. Table 7-3 presents a set of death rates for each of the major causes of death among Skid Row men.<sup>1</sup> A corresponding death rate among males in the general population is provided for purposes of comparison. From this evidence it may be seen that mortality among homeless men is especially greater than among the general population, for the following causes of death:

<u>Cause of death</u>	<u>Ratio of Skid Row rate to national rate for males:</u>
Heart disease, type not specified . . . . .	233.0 times as large
Tuberculosis . . . . .	36.9 " " "
Alcoholism and alcoholic psychosis . . . . .	16.0 " " "
Accidents from falls . . . . .	14.7 " " "
Pneumonia . . . . .	14.2 " " "
Cirrhosis of the liver . . . . .	11.0 " " "
Other diseases of respiratory system . . . . .	9.4 " " "
Suicide . . . . .	5.1 " " "

It has been demonstrated in other studies that the Skid Row area is an important incubator of tuberculosis infection.<sup>2</sup> This has an immediate effect upon the general population because Skid Row workers come into direct contact with the general public in a variety of ways. The most common way is through restaurants, where they are often hired temporarily to meet overflow crowds on week-ends, during conventions, etc. If one applies any one of the factors used by public health persons that measure the prevalence of tuberculosis as a ratio of the tuberculosis death rate, one cannot avoid concluding that a large percentage of the Skid Row population is tuberculous. The cubicle-hotel, with a minimum of sunlight, ventilation, and cleanliness, provides a good environment for the culture of tuberculosis.

Pneumonia is a by-product of long continued exposure to the elements, poor diet, inadequate clothing, and excessive drinking. In the winter, almost everyone on Skid Row has a cold. The sidewalks are strewn with sputum (one respondent stated sarcastically that Skid Row gets its name from the thousands of "oysters" on the sidewalks!) and infection is hard to check in cubicle hotels where the air breathed by each is shared by all.

<sup>1</sup>Table 7-3 refers to both white and nonwhite population, whereas tables 7-1 and 7-2 referred to white population only.

<sup>2</sup>Tuberculosis patients who have a drinking problem refuse to remain in the sanatorium long enough to complete their cure. They tend to leave as quickly as the primary symptoms disappear.

Table 7-3: Death Rates per 100,000, by Cause of Death, for Males in the U. S. General Population 1956 and for Men Living in Cubicle-type Hotels in Chicago, 1955-57.

Cause of death	Skid Row males	U. S. males	Ratio of Skid Row rate to U. S. rate
Total. . . . .	6359.9	1083.0	5.9
Tuberculosis. . . . .	446.7	12.1	36.9
Syphilis. . . . .	6.7	3.4	2.0
Cancer. . . . .	490.0	158.5	3.1
Diabetes. . . . .	20.0	12.5	1.6
Alcoholism or alcoholic psychosis . . . . .	36.7	2.3	16.0
Vascular lesions affecting central nervous system. . . . .	320.0	103.8	3.1
Diseases of the heart . . . . .		429.9	
Arteriosclerotic heart disease so described. . . . .	690.0	113.4	6.1
Heart disease specified as involving coronary arteries . . . . .	1050.0	212.8	4.9
Other specified heart disease. . . . .	250.0	106.0	2.4
Other unspecified heart disease. . . . .	1796.6	7.7	233.3
Pneumonia . . . . .	440.0	30.9	14.2
Other diseases of respiratory system. . . . .	36.7	3.9	9.4
Diseases of digestive system. . . . .	63.3	21.1	3.0
Cirrhosis of liver. . . . .	156.7	14.2	11.0
Diseases of genito-urinary system . . . . .	63.3	24.6	2.6
Accidents--motor vehicle and railway. . . . .	86.7	37.6	2.3
Accidental falls. . . . .	176.7	12.0	14.7
Other accidents . . . . .	76.7	30.2	2.5
Suicide . . . . .	80.0	15.8	5.1
Homicide. . . . .	30.0	9.6	2.2
Other causes, specified . . . . .	43.1	150.6	0.3

The automotive accidents occur to homeless men as pedestrians--they are struck by passing automobiles. The accidental deaths from "falls" are partly the work of jackrollers, partly the result of fighting while drinking, and partly a self-inflicted by-product of drinking. Many men experience severe depression and suicidal tendencies after episodes of heavy drinking, and the discouragement of Skid Row life also tends toward suicide.

Season of death. There is a definite seasonality to death, even among the general population; a disproportionately large share of all deaths occur during the winter months. Among Skid Row homeless men, the winter months are unusually severe. The following summary shows the situation:

<u>Season</u>	<u>Percent of deaths</u>	
	<u>Skid Row</u>	<u>U.S. males</u>
Winter . . . . .	30.5	26.2
Spring . . . . .	25.0	25.7
Summer . . . . .	18.2	23.9
Autumn . . . . .	26.3	24.2
Total . . . . .	100.0	100.0

Summary. Death rates from most causes are several times higher among the homeless men than among the general population. The exact reasons for this must be guessed at cautiously. (a) There probably is a selective process, whereby men without families whose health is failing and who have no money or persons to care for them move here to die. (b) Men who have lived in poverty and without medical care for many years would be expected to have high mortality rates. (c) Prolonged heavy drinking undoubtedly causes the life span to be drastically reduced--many men on Skid Row literally "drink themselves to death." (d) Life in the cubicle-type hotel may be conducive to the spread of infectious diseases, and especially to pulmonary disorders. (e) Medical help is unavailable to many of the homeless men when severe illness strikes. (f) Homeless men may be far more negligent in caring for their health than most other men; they may eat poorer food, get less rest, work when ill, etc. What ever the factors may be, the situation produced is probably worse than in any other segment of the population. Skid Row appears to be the last outpost of avoidable and preventable death.



## Chapter 8

### ILLNESS AMONG SKID ROW MEN

How sickly are the men who live on Skid Row in comparison with the general male population of the same age? Do they suffer from diseases and physical impairments that no longer afflict the general population? How many of these men could be made completely or partially self-supporting if they were given medical care that would reduce the extent of their physical handicaps, insofar as this is possible? How much medical care would it take and how much would it cost to restore these men to good physical health with maximum possible rehabilitation? This chapter undertakes to answer these questions.

The U. S. Public Health Service has developed a battery of questions which it uses in its National Health Survey to determine the extent of illness and the nature of the diseases or other debilitating conditions that are prevalent among the population. These same questions were included in the interviews with the homeless men. By tabulating the responses to these questions according to N. H. S. specifications, it is possible to discuss the health of Skid Row men in comparison with that of the general population.<sup>1</sup> These health questions are reproduced in the copy of the interview included in the appendix. When a man had answered these questions fully, and his answers had been "probed" by the interviewer to elicit exact and full descriptions of his illnesses, and symptoms of illness, he had submitted a very detailed and complete inventory of every condition that was a health problem of which he was conscious. Certainly it is true that if a physician had given each man a physical examination he would have found additional conditions and disorders of which the man was not aware. Undoubtedly many diseases, such as cancer in early stages, high blood pressure, tuberculosis in early stages, etc. were unrecorded. Therefore the materials understate the degree of sickness among the men.

The elaborate body of health information obtained for each man was used in two ways: (1) The record of the man's illnesses was "coded" into specific diseases and disorders, and tabulated to show how prevalent each kind of disease is on Skid Row, and how many days of work are lost because of sickness. As stated above, this was done in strict accordance with procedures specified by the National Health Survey. (2) A physician carefully read the medical inventory for each man, as obtained in the interview, and used his expert knowledge to perform four tasks:<sup>2</sup>

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<sup>1</sup>Unfortunately, at the time of writing, the National Health Survey has not yet been in existence long enough to have accumulated enough evidence to publish detailed statistics concerning the incidence and prevalence of specific illnesses among the population. Hence, many of the tabulations reported here for Skid Row men have not as yet been matched by N. H. S. tabulations. Comparisons are made wherever data exist.

<sup>2</sup>The author takes pleasure in acknowledging the contribution of Dr. Richard Thompson, physician at Billings Hospital, University of Chicago, for his conscientious and diligent work as medical consultant to this study. Dr. Thompson carried out the four steps described for each of the medical inventories.

First, he classified each man according to the degree of his present physical disability, into one of the following five categories:

Unable to work: Man has an ailment or injury which prevents him from holding a steady job, even part-time.

Severely handicapped: Man has an ailment or injury which severely limits the kind of work he can do, or permits him to work only part-time.

Moderately handicapped: Man has ailments or injuries which restrict considerably the kinds of work he can do, but can hold several types of steady jobs.

Slightly handicapped: Man has ailments or disabilities which place a few restrictions upon his work activities.

Not handicapped: Man has no ailments or disabilities that restrict his work activities.

These categories were established under the assumption that the only kind of work for which the man was fitted was as a laborer or semi-skilled operative, where a considerable amount of physical exertion would be required.

Second, using the above five categories with the same definitions and assumptions, he estimated how handicapped the man would be if he were to receive the medical care that his present condition indicated was needed. In some cases, treatment would do nothing to shift the man from an upper category to one lower in the scale, while in other cases shifts of one or two places would be possible.

Third, the physician recorded his estimate of how much treatment would be necessary to relieve or remove the conditions reported by the man, insofar as this is possible. This was expressed in terms of days in hospitals, number of doctor visits, etc.

Fourth, using the standard rates of Blue Cross and Blue Shield, and knowledge of hospital charges for items not covered by published rates, he converted the needed medical treatment into dollars of cost.

Thus, on the basis of the physician's analysis of the medical inventory for each man it was possible not only to learn how disabled homeless men are as a group, but also to estimate to what extent they could be rehabilitated by a program of medical care and how much it would cost to carry out such a program. The statistics of this chapter are based upon the National Health Survey-type statistics and upon the tabulations of the physician's ratings and estimates of disability, potential amount of rehabilitation, needed medical care, and cost of needed medical care.

## Part I

## PREVALENCE OF ILLNESS AND DISABILITY AMONG SKID ROW MEN

The inventory of sicknesses and symptoms of illness experienced by the homeless men was obtained by asking each man all of the following seven questions:

1. Were you sick at any time last week or the week before?
  - (a) What was the matter?
  - (b) Anything else?
2. Last week or the week before did you have any accidents or injuries, either at home or away from home?
  - (a) What were they?
  - (b) Anything else?
3. Last week or the week before did you feel any ill effects from an earlier accident or injury?
  - (a) What were these effects?
  - (b) Anything else?
4. Last week or the week before did you take any medicine or treatment for any conditions (besides those which you told me about)?
  - (a) For what conditions?
  - (b) Anything else?
5. At the present time do you have any ailments or conditions that have continued for a long time? (If "No," ask:) Even though they don't bother you all the time?
  - (a) What are they?
  - (b) Anything else?
6. Have you had any of the conditions listed on this card (Card A) during the past 12 months? (Card A lists the following chronic conditions: asthma; allergy; tuberculosis; chronic bronchitis; repeated attacks of sinus trouble; rheumatic fever; hardening of the arteries; high blood pressure; heart trouble; stroke; trouble with varicose veins; hemorrhoids or piles; gallbladder or liver trouble; stomach ulcer; any other chronic stomach trouble; kidney stones or other kidney trouble; arthritis or rheumatism; prostate trouble; diabetes; thyroid trouble or goiter; epilepsy or convulsions of any kind; mental or nervous trouble; repeated trouble with back or spine; tumor or cancer; chronic skin trouble; hernia or rupture.)
7. Do you have any of the conditions listed on this other card (Card B)? (Card B lists the following impairments: deafness or serious trouble with hearing; serious trouble with seeing, even with glasses; condition present since birth, such as cleft palate or club foot; stammering or other trouble with speech; missing fingers, hand, or arm; missing toes, foot, or leg; cerebral palsy; paralysis of any kind; any permanent stiffness or deformity of the foot or leg, fingers, arm, or back.)

The Public Health Service and other health research organizations have found that only by such a "dredging operation" is it possible to get the public to recall its ailments. (And even with this effort, some are forgotten, omitted, or are unknown to the respondent.) Once having obtained a list of the illnesses which had afflicted

the person within the past 2 weeks and the chronic conditions he had had during the past year, the interviewers then asked a series of questions concerning how debilitating they had been (number of days of restricted activity, number of days in bed, number of days of work lost) and what medical care was received.

Number of conditions. Approximately one fifth of the men on Skid Row reported that they had no ailments, while 80 percent reported one or more diseases or sicknesses in response to the above battery of questions. The percentage of men having one, two, three, etc., ailments were as follows:

	<u>Percent of men</u>
No ailments . . . . .	20.3
1 ailment . . . . .	23.5
2 ailments. . . . .	19.7
3 ailments. . . . .	16.6
4 ailments. . . . .	6.9
5 ailments. . . . .	4.3
6 ailments. . . . .	3.0
7 ailments. . . . .	2.7
8 ailments. . . . .	1.7
9 ailments. . . . .	0.5
10 ailments or more . . .	0.6
Total. . . . .	<u>100.0</u>

(In evaluating the diseases reported, an acute condition was tabulated if it caused the man to cut down on his activities as much as one day or more in the past two weeks.) This averaged out to 2.2 ailments per man. The great majority of the conditions reported were of the variety defined as "chronic" rather than "acute." A chronic condition is one that was listed on Card A above, or else any other condition that had persisted for three months or more. Thus, 4 out of 5 men on Skid Row had suffered recently from some condition that had caused them to cut down on their usual activities. In general, men who were older, who were alcoholic derelicts, or who were pensioners had the greatest number of different disorders, while young men, light or moderate drinkers, or men who were working had the fewest. (See table 8-1.)

Disabling effects of illness. Illness caused the average man on Skid Row to reduce his usual activities for 3.3 of the 14 days in the preceding two weeks. This means that during midwinter (the time the survey was taken), between one fourth and one fifth of the men on Skid Row (about 23.5 percent) are sick on any given day. It also means that if continued throughout the year, the average man on Skid Row would have 85 sick days out of 365. This is 3.3 times the rate among the general U. S. population reported by the National Health Survey for this season of the year.

The men had spent an average of one day of the past two weeks in bed as a result of illness. This was 2.4 times the rate of bed-disability per year among the general population at this time of year. It is also roughly 4 times the rate for males of all ages, and is even 1.7 times the rate for males 65 years of age and over among the general population. Sickness was causing the men on Skid Row to stay away from work or to avoid looking for work at the rate of 53 days per year, which is 4.1 times the rate among the general working population for this season of the year. It also means that on any given working day in midwinter, slightly more than 20 percent of the workingmen on Skid Row are away from work because of illness. Among the general population, even workers who are 65 years of age lose fewer than one half this many days of work due to illness.

Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 1 of 3)

Item	Item No.	Number of different ailments			Number of acute ailments deleted	Days of restricted activity		
		Total	Chronic	Acute		Total	Due to chronic conditions	Due to acute conditions
<b>AGE</b>								
Total, all ages . . . . .	1	224.0	203.2	20.7	18.2	329.1	254.2	95.7
20-34 years . . . . .	2	140.0	121.7	18.3	14.3	122.9	52.6	70.3
35-44 years . . . . .	3	162.4	142.0	20.4	18.7	227.3	162.7	89.4
45-54 years . . . . .	4	230.9	212.1	18.8	17.4	313.1	251.3	75.6
55-64 years . . . . .	5	299.7	272.3	27.4	19.1	569.9	494.8	98.2
65 years and over . . . . .	6	261.7	243.0	18.7	20.0	350.3	237.0	150.3
<b>DRINKING CLASSIFICATION</b>								
Total, all . . . . .	7	224.0	203.2	20.7	18.2	329.1	254.2	95.7
Teetotaler . . . . .	8	238.2	217.7	20.5	15.0	447.6	357.1	101.2
Light drinker . . . . .	9	210.5	195.7	14.8	20.7	330.4	288.1	64.3
Moderate drinker . . . . .	10	204.3	181.1	23.2	17.5	310.5	197.4	130.4
Heavy drinker . . . . .	11	218.8	196.5	22.3	17.9	251.3	173.6	88.3
Alcoholic derelict . . . . .	12	283.8	256.5	27.3	18.1	345.4	294.0	105.1
<b>DRINKING-DISABILITY-AGE CLASSIFICATION</b>								
Total, all ages . . . . .	13	224.0	203.2	20.7	18.2	329.1	254.2	95.7
<b>A. Severely and moderately handicapped . . . . .</b>								
1. Elderly - 65 years of age or older . . . . .	14	342.9	312.9	30.0	19.3	580.9	463.4	156.1
Teetotaler and light drinkers . . . . .	15	308.3	288.8	19.6	20.0	382.9	261.3	167.9
Moderate and heavy drinkers . . . . .	16	306.0	284.3	21.7	18.1	422.9	276.5	188.0
2. Young and middle aged - 20 to 64 years . . . . .	17	313.5	298.6	14.9	24.3	293.2	227.0	123.0
Teetotaler and light drinkers . . . . .	18	357.8	323.3	34.5	19.0	666.2	550.4	151.0
Moderate drinkers . . . . .	19	354.6	329.2	25.5	21.3	764.8	718.1	76.9
Heavy drinkers and derelicts . . . . .	20	349.1	307.8	41.4	19.8	693.1	465.5	235.3
20-44 years of age . . . . .	21	365.3	325.8	39.6	16.4	557.8	433.3	178.7
45-64 years of age . . . . .	22	332.9	306.8	26.0	23.3	430.1	339.7	135.6
	23	380.9	334.9	46.1	13.2	619.1	478.3	199.3

Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 1 of 3) (continued)

Item no.	Days in bed			Days work lost			Hospitalization		
	Total	Due to chronic condition	Due to acute condition	Total	Due to chronic condition	Due to acute condition	Days in last 2 weeks	Times last year	Days last year
1	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
2	56.6	29.1	27.4	97.7	41.1	56.6	266.9	12.0	448.6
3	63.9	30.0	33.9	163.1	106.4	65.1	296.6	16.7	691.2
4	85.1	57.2	30.3	216.4	172.3	54.1	369.1	20.8	821.0
5	169.0	136.5	41.9	394.5	347.4	57.8	877.8	22.2	1050.8
6	146.3	64.0	95.3	94.0	80.0	14.0	523.0	8.0	468.3
7	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
8	164.2	115.0	52.8	213.4	198.0	15.4	827.6	14.2	349.7
9	97.5	66.1	40.0	194.5	174.7	24.8	318.7	11.9	655.1
10	72.5	26.8	45.7	210.3	131.3	81.1	435.9	13.6	886.6
11	103.5	51.0	54.3	180.1	127.6	65.7	297.4	17.6	415.0
12	109.3	94.0	28.2	243.5	194.4	67.6	696.8	37.0	1577.8
13	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
14	185.4	119.6	76.5	352.2	295.5	71.6	884.6	26.1	1308.4
15	167.9	80.0	105.4	102.5	100.0	2.5	591.3	8.8	522.9
16	200.6	103.0	122.9	94.0	90.4	3.6	762.7	4.2	465.7
17	94.6	28.4	66.2	121.6	121.6	...	206.8	18.9	651.4
18	193.0	136.6	64.1	459.8	379.7	101.4	1011.0	33.6	1646.9
19	207.9	166.2	45.8	503.2	479.6	35.2	977.8	28.7	1217.6
20	155.2	80.2	75.0	494.0	325.9	175.9	1184.5	25.0	2331.9
21	198.2	137.3	76.0	400.4	311.6	126.7	953.3	42.7	1705.8
22	128.8	100.0	28.8	304.1	230.1	94.5	850.7	45.2	1927.4
23	231.6	155.3	99.7	446.7	350.7	142.1	1002.6	41.4	1599.3

Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 2 of 3)

Item	Item no.	Number of different ailments			Number of acute ailments deleted	Days of restricted activity		
		Total	Chronic	Acute		Total	Due to chronic conditions	Due to acute conditions
DRINKING-DISABILITY-AGE CLASSIFICATION (continued)								
B. Slightly and not handicapped. . . . .	24	120.9	105.4	12.7	17.2	110.7	72.8	43.4
1. Elderly - 65 years of age or older . . . . .	25	75.0	60.0	15.0	20.0	220.0	140.0	80.0
Teetotaler and light drinkers . . . . .	26	61.5	61.5	...	15.4	215.4	215.4	...
Moderate and heavy drinkers . . . . .	27	100.0	57.1	42.9	28.6	228.6	...	228.6
2. Young and middle aged - 20 to 64 years. . . . .	28	124.0	111.4	12.6	17.0	103.0	68.1	40.9
Teetotaler and light drinkers . . . . .	29	103.8	93.4	10.3	17.8	96.3	67.5	28.8
Moderate drinkers. . . . .	30	117.5	103.5	14.0	11.4	128.1	69.7	67.5
Heavy drinkers and derelicts. . . . .	31	149.5	135.7	13.8	20.3	91.6	67.5	33.8
20-44 years of age. . . . .	32	134.6	118.4	16.2	17.9	93.9	57.0	53.6
45-64 years of age. . . . .	33	169.7	159.1	10.6	23.5	88.6	81.8	6.8
PENSION STATUS								
Total . . . . .	34	224.0	203.2	20.7	18.2	329.1	254.2	95.7
Not a pensioner . . . . .	35	178.1	160.6	17.5	14.5	154.8	103.7	68.4
Pension - General Public Assistance (welfare). . . . .	36	312.3	283.9	28.5	19.0	807.3	699.1	152.8
Pension - retirement. . . . .	37	284.0	264.6	19.5	25.3	390.7	296.9	97.3
Temporary pensions - unemployment comp. . . . .	38	176.0	154.1	21.9	24.6	212.0	138.3	75.4
No information or evaluation impossible. . . . .	39	312.9	284.3	28.6	18.6	465.7	305.7	232.9
VETERANS STATUS								
Total. . . . .	40	224.8	205.0	19.8	18.3	326.4	257.3	94.8
No military service . . . . .	41	228.5	208.4	20.1	18.2	332.8	261.4	97.9
Military service before World War II. . . . .	42	300.4	273.2	27.3	18.6	551.1	457.6	135.5
World War II. . . . .	43	204.3	189.3	14.9	18.3	182.3	145.7	57.6
After World War II. . . . .	44	112.4	96.2	16.2	12.4	161.0	81.9	86.7
No information. . . . .	45	186.7	163.3	23.3	40.0	620.0	466.7	153.3

Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 2 of 3) (continued)

Item no.	Days in bed			Days work lost			Hospitalization		
	Total	Due to chronic condition	Due to acute condition	Total	Due to chronic condition	Due to acute condition	Days in last 2 weeks	Times last year	Days last year
24	33.3	16.3	17.0	76.3	43.9	32.4	102.8	9.0	237.0
25	60.0	...	60.0	60.0	...	60.0	250.0	5.0	250.0
26	...	...	...	...	...	...	...	...	...
27	171.4	...	171.4	171.4	...	171.4	714.3	14.3	714.3
28	31.4	17.5	14.0	77.4	46.9	30.5	92.5	9.3	236.1
29	34.4	26.3	8.1	76.9	52.5	24.4	86.3	7.8	210.6
30	21.9	4.4	17.5	92.1	48.7	43.4	68.9	6.1	167.1
31	35.4	18.0	17.4	67.2	39.9	27.3	116.4	13.2	312.9
32	31.8	1.7	30.2	66.5	22.9	43.6	86.6	6.1	103.4
33	40.2	40.2	...	68.2	62.9	5.3	156.8	22.7	597.0
34	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
35	62.4	34.6	31.2	100.2	62.8	44.7	243.6	11.6	306.5
36	208.2	157.9	63.6	519.3	467.7	57.3	916.8	29.7	1600.3
37	124.5	64.6	59.9	178.6	150.6	28.0	656.4	16.0	893.8
38	53.0	30.1	23.0	160.1	104.4	63.9	349.7	12.6	372.1
39	220.0	107.1	130.0	318.6	204.3	114.3	861.4	42.9	2632.9
40	98.5	57.7	47.4	198.2	159.1	47.1	453.2	14.5	661.5
41	119.5	71.3	61.7	191.9	169.8	34.3	482.0	15.2	793.1
42	113.0	74.0	42.9	322.9	259.3	72.3	720.8	14.3	850.6
43	40.9	15.2	25.6	124.1	86.6	37.5	294.2	14.9	433.8
44	83.8	58.1	25.7	127.6	64.8	72.4	95.2	7.6	274.3
45	246.7	120.0	106.7	420.0	293.3	126.7	800.0	23.3	390.0



Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 3 of 3)

Item	Item no.	Number of different ailments			Number of acute ailments deleted	Days of restricted activity		
		Total	Chronic	Acute		Total	Due to chronic conditions	Due to acute conditions
<b>EMPLOYMENT STATUS</b>								
Total . . . . .	46	224.0	203.2	20.7	18.2	329.1	254.2	95.7
Employed - steady job . . . . .	47	136.3	122.4	13.9	14.7	55.5	20.3	35.2
Employed - spot job . . . . .	48	185.4	167.2	18.2	17.5	101.3	49.0	59.1
Unemployed . . . . .	49	187.0	172.8	14.2	25.2	125.7	92.8	43.9
Not in labor force -								
unable to work . . . . .	50	330.3	309.7	20.6	16.6	840.5	753.1	127.1
did not care to work . . . . .	51	265.8	241.9	23.9	16.1	332.3	278.1	104.5
Possibly in labor force temporarily ill . . . . .	52	352.9	278.8	74.0	14.4	935.6	502.9	497.1
<b>DISABILITY STATUS</b>								
Total . . . . .	53	224.0	203.2	20.7	18.2	329.1	254.2	95.7
Too old to work . . . . .	54	266.2	243.0	23.2	21.9	288.7	119.2	175.5
Unable to work . . . . .	55	456.0	420.0	36.0	12.0	1256.0	1144.0	392.0
Severely handicapped . . . . .	56	448.4	414.3	34.2	9.9	1093.2	991.9	175.8
Moderately handicapped . . . . .	57	325.0	294.6	30.4	22.2	460.9	354.3	130.0
Slightly handicapped . . . . .	58	212.3	194.2	18.1	20.0	213.3	153.7	71.4
Not handicapped . . . . .	59	40.3	32.3	8.0	14.7	20.4	1.6	18.8
<b>REHABILITATION CLASSIFICATION</b>								
Total . . . . .	60	224.0	203.2	20.7	18.2	329.1	254.2	95.7
No change after medical treatment . . . . .	61	208.0	190.9	17.1	15.7	311.0	252.8	77.9
Too old to work . . . . .	62	266.2	243.0	23.2	21.9	288.7	119.2	175.5
Both before and after:								
Unable to work . . . . .	63	450.0	415.0	35.0	15.0	1220.0	1080.0	350.0
Severely handicapped . . . . .	64	469.1	442.3	26.8	3.1	1108.2	1077.3	143.3
Moderately handicapped . . . . .	65	359.8	335.4	24.4	19.1	558.1	471.5	105.3
Slightly handicapped . . . . .	66	247.3	227.4	19.9	15.1	236.3	202.7	47.9
Not handicapped . . . . .	67	40.3	32.3	8.0	14.7	20.4	1.6	18.8
Rehabilitation status improved after medical treatment . . . . .	68	256.3	228.0	28.2	23.3	365.8	257.0	131.9
Rehabilitated to be:								
Moderately handicapped . . . . .	69	440.3	403.2	37.1	21.0	1059.7	912.9	209.7
Slightly handicapped . . . . .	70	287.7	252.9	34.8	24.0	342.6	237.3	125.5
Not handicapped . . . . .	71	197.0	175.1	21.9	23.3	238.5	135.2	120.3

Table 8-1: Measures of Prevalence of Illness and its Disabling Effects, per 1,000 Men, Skid Row, Chicago: 1957. (Part 3 of 3) (continued)

Item no.	Days in bed			Days work lost			Hospitalization		
	Total	Due to chronic condition	Due to acute condition	Total	Due to chronic condition	Due to acute condition	Days in last 2 weeks	Times last year	Days last year
46	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
47	18.4	5.6	12.8	40.8	13.6	27.2	190.9	7.2	145.1
48	52.6	14.9	37.7	71.4	30.2	46.1	199.4	13.6	317.2
49	53.6	40.6	16.0	101.0	76.3	33.9	197.0	12.2	622.7
50	242.9	172.1	87.9	506.7	487.9	26.5	1092.0	25.5	1438.9
51	38.7	15.5	23.2	118.1	73.5	44.5	313.5	11.0	369.7
52	357.7	199.0	167.3	631.7	359.6	308.7	1265.4	58.7	2546.2
53	104.0	64.3	44.6	204.4	160.7	50.6	456.9	17.0	734.6
54	189.4	49.7	139.7	...	...	...	369.5	9.9	376.2
55	744.0	640.0	360.0	904.0	824.0	160.0	5196.0	44.0	2048.0
56	305.6	269.6	49.1	729.8	668.9	77.6	1734.2	60.9	3011.2
57	111.7	61.7	50.0	305.7	233.0	88.3	522.0	18.3	978.3
58	63.0	34.9	28.1	143.5	91.9	51.6	181.4	10.9	259.8
59	7.2	...	7.2	17.2	1.6	15.5	33.7	7.4	217.0
60	104.0	64.3	44.6	204.4	160.7	50.6	465.9	17.0	734.6
61	102.8	66.2	44.0	187.2	162.4	30.1	508.3	16.2	670.8
62	189.4	49.7	139.7	...	...	...	369.5	9.9	376.2
63	790.0	660.0	310.0	880.0	780.0	100.0	6495.0	55.0	2560.0
64	297.9	291.8	56.7	762.9	759.8	36.1	2032.0	61.9	2901.0
65	133.3	88.2	45.1	381.3	317.9	75.2	616.3	18.7	877.2
66	58.2	37.0	21.2	145.9	125.3	20.5	226.7	12.3	407.5
67	7.2	...	7.2	17.2	1.6	15.5	33.7	7.4	217.0
68	106.3	60.3	46.0	239.3	157.3	92.2	380.1	18.5	863.8
69	327.4	243.5	83.9	701.6	596.8	129.0	1243.5	50.0	3035.5
70	90.7	46.6	44.1	202.0	137.3	77.0	458.3	15.2	1124.5
71	71.4	31.9	39.5	169.4	80.4	95.0	149.2	14.3	239.9

Thus, no matter how viewed, when allowance is made for the age composition of the Skid Row population, it can only be concluded that illness has roughly 2.0 to 2.5 times the disabling effect upon Skid Row residents that it has upon the male population generally. This does not necessarily mean that living on Skid Row causes people to get sick; this greater sickness of Skid Row residents may be due partly to the fact that sick people who have no families to take care of them and who lack funds may move (or be moved) to Skid Row to live. It may also mean that heavy drinking by some of the men may drive illness rates up. Some of the possible explanations are evaluated later in this chapter, after the health picture has been developed more completely.

#### A. Chronic conditions.

A morbidity condition is considered to be chronic if it is described by the respondent (1) in terms of one of the chronic diseases on a "Check List of Chronic Conditions" (Card A, above), or (2) as having been first noticed more than three months before the week of the interview. Table 8-2 reports the prevalence of chronic conditions among the Skid Row men.

These statistics state the number of cases of each chronic condition that had been present at some time within the past year among each 1,000 men. A high percentage of chronic conditions are not easily "cured," but can only be arrested or retarded (especially under the conditions of minimum medical care that are found on Skid Row). Therefore, these statistics are a fairly true measure of current prevalence of these conditions among the homeless men. This being the case, one notes the following:

<u>Disease</u>	<u>Approximate prevalence</u>
Tuberculosis. . . . .	1 man in 30
Mental illness. . . . .	1 man in 11
Mental and nervous trouble. . . . .	1 man in 11 (in addition to above)
Chronic disorders of the digestive system	1 man in 10
Arthritis and rheumatism. . . . .	1 man in 8
Other diseases of muscles, bones, joints.	1 man in 4
Impaired hearing. . . . .	1 man in 9
Impaired vision . . . . .	1 man in 16
Hernia. . . . .	1 man in 12
Hypertension. . . . .	1 man in 16
Hemorrhoids . . . . .	1 man in 14
Heart diseases. . . . .	1 man in 16
Ulcers of the stomach . . . . .	1 man in 40
Asthma. . . . .	1 man in 11
Skin infection. . . . .	1 man in 25
Missing foot or arm . . . . .	1 man in 16

Although statistics are not yet available with which to compare these prevalences in the general population, it is almost certain that they are considerably higher than the National Health Survey is finding for adult males.

Chronic ailments are generally afflictions of middle and old age. Although this is generally true also for Skid Row men, the rates of chronic illness are surprisingly high, even among younger men.<sup>1</sup> Young men tend to be especially severely afflicted

<sup>1</sup>Due to the small size of the sample and the detailed nature of the cross-tabulation of diseases by age, the data of table 8-2 are subject to a rather wide sampling variability, and hence must be interpreted with extreme caution.

Table 3-2: Number of Chronic Conditions by Age per 1,000 Men: Skid Row, Chicago, 1957

Chronic condition	NHS Recode number	Rate per 1,000 in age-group				
		Total	20-44	45-54	55-64	65 & over
Tuberculosis, all forms . . . . .	01	33.2	32.6	39.6	45.6	10.0
Malignant neoplasms . . . . .	02	3.5	...	11.9	...	...
Benign and unspecified neoplasms. . . . .	03	1.2	3.4	...	...	...
Asthma and hay fever. . . . .	04	90.9	49.8	87.1	170.2	90.0
Other allergies . . . . .	05	15.7	6.9	21.8	27.4	10.0
Diabetes mellitus . . . . .	06	6.4	...	11.9	9.1	6.7
Anemia. . . . .	07	2.9	...	...	...	16.7
Headache and migraine . . . . .	08	16.3	22.3	5.9	27.4	10.0
Mental illness. . . . .	09	93.2	125.4	116.8	76.0	10.0
Ill-defined mental and nervous trouble. . . . .	10	90.3	103.1	101.0	79.0	60.0
Heart disease . . . . .	11	66.4	18.9	53.5	121.6	120.0
Hypertension without heart involvement. . . . .	12	66.4	65.3	81.2	36.5	76.7
Varicose veins. . . . .	13	53.6	15.5	59.4	79.0	90.0
Hemorrhoids . . . . .	14	76.9	39.5	99.0	115.5	70.0
Other diseases of the circulatory system . . . . .	15	16.3	8.6	17.8	33.4	10.0
Sinusitis . . . . .	16	123.0	99.7	114.9	179.3	120.0
Bronchitis. . . . .	17	34.4	12.0	33.7	69.9	40.0
Other diseases of the respiratory system . . . . .	18	50.1	46.4	41.6	60.8	60.0
Ulcer of stomach and duodenum . . . . .	19	28.0	36.1	17.8	27.4	30.0
Hernia. . . . .	20	81.0	29.2	77.2	97.3	170.0
Diseases of the gallbladder . . . . .	21	7.0	...	...	18.2	20.0
Constipation. . . . .	22	5.2	...	...	9.1	20.0
Other diseases of the digestive system . . . . .	23	102.6	85.9	124.8	118.5	80.0
Other diseases of the genito- urinary system . . . . .	26	56.5	32.6	41.6	91.2	90.0
Skin infections and diseases. . . . .	27	40.2	36.1	11.9	45.6	90.0
Arthritis and rheumatism. . . . .	28	131.7	51.5	108.9	255.3	190.0
Back conditions . . . . .	29	28.6	30.9	51.5	6.1	10.0
Other conditions of the muscles, bones, and joints. . . . .	30	238.3	182.1	249.5	313.1	246.7
Impairment of vision. . . . .	31	69.9	27.5	59.4	100.3	136.7
Impairment of hearing . . . . .	32	119.5	51.5	134.7	136.8	206.7
Paralysis of extremities and/or trunk. . . . .	33	8.2	5.2	5.9	24.3	...
Absence of extremities except fingers and toes . . . . .	34	8.7	...	5.9	27.4	10.0
Other chronic conditions. . . . .	35	265.2	140.9	334.7	319.1	330.0
Intracranial lesions. . . . .	36	1.7	...	...	9.1	...

with:

- Tuberculosis
- Mental illness and nervous troubles
- Miscellaneous disorders of the respiratory system
- Ulcers of stomach
- Arthritis and rheumatism
- Conditions of bones, joints.

Surprisingly, the highest rates for many of the chronic ailments are not found among the older men (those 65 years of age or older) but among the middle-aged men, 45-64. This may be the difference between pensioners, who have access to medical care and nonpensioners who have no access to medical care. For example, rates of the following diseases are lower among the older men than among the middle-aged men:

- Tuberculosis
- Asthma and hay fever
- Mental illness
- Nervous conditions, ill defined
- Hemorrhoids
- Sinusitis
- Bronchitis
- Miscellaneous diseases of the digestive system
- Arthritis and rheumatism
- Back conditions
- Other conditions of muscles, bones, joints
- Paralysis of extremities
- Absence of extremities.

This is a rather long and impressive list, and could not possibly be a chance occurrence. One can only conclude that the older men live more regular lives, take better care of themselves, and receive more medical care than the middle-aged men on Skid Row.

#### B. Acute conditions.

Acute conditions are defined as illness or injury conditions of 3 months or less duration and that are not arbitrarily defined as chronic (Card A), that had afflicted the respondent during the two weeks preceding the interview. Table 8-3 measures the prevalence of these conditions. The common cold and other acute respiratory conditions are the most common acute conditions. About 1 person in 14 had suffered one<sup>1</sup> or more days of reduced activity in the past week because of a respiratory condition.

Injuries are the most common form of acute condition on Skid Row.

- 2.4 percent were suffering from a fracture or dislocation.
- 1.2 percent were suffering from a contusion.
- 0.9 percent were suffering from open wounds and lacerations.
- 0.5 percent were suffering from sprains and strains.
- 1.5 percent were suffering from other current injuries.

If there were no duplications (a few men had more than one injury) at the time of the survey, 1 man in 8 had suffered one day or more of reduced activity because of an injury.

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<sup>1</sup>There is considerable reason to believe that the Use of the National Health Survey

Table 8-3: Number of Acute Conditions by Age per 1,000 Men: Skid Row, Chicago, 1957

Acute condition	NHS Recode number	Rate per 1,000 in age-group				
		Total	20-44	45-54	55-64	65 & over
*Other infective and parasitic diseases	03	1.7	...	5.9	...	...
Diseases of the ear. . . . .	04	3.5	...	5.9	9.1	...
Common cold. . . . .	05	35.0	39.5	31.7	45.6	20.0
Other acute upper respiratory conditions. . . . .	06	5.2	5.2	...	9.1	10.0
Other respiratory conditions . . . . .	09	36.1	46.4	23.8	33.4	40.0
Dental conditions. . . . .	10	5.2	10.3	...	9.1	...
"Intestinal flu" . . . . .	12	5.2	10.3	5.9	...	...
Other digestive system conditions. . . . .	13	15.1	5.2	21.8	9.1	30.0
Headaches. . . . .	14	1.7	5.2	...	...	...
Genito-urinary disorders . . . . .	15	4.7	...	...	24.3	...
Diseases of the skin . . . . .	18	8.1	5.2	5.9	15.2	10.0
Diseases of the musculoskeletal system. . . . .	19	10.5	10.3	11.9	9.1	10.0
Fractures and dislocations . . . . .	20	23.9	18.9	27.7	27.4	23.3
Sprains and strains. . . . .	21	5.2	5.2	...	9.1	10.0
Open wounds and lacerations. . . . .	22	9.3	13.7	15.8	...	...
Contusions and superficial injuries.	23	11.7	8.6	11.9	27.4	...
Other current injuries . . . . .	24	14.6	5.2	15.8	24.3	20.0
All other acute conditions . . . . .	25	9.3	8.6	4.0	15.2	13.3

\*Except common childhood diseases and the "virus".

Severe digestive upsets appear to be comparatively common on Skid Row. Two percent of the men reported one or more days of reduced activity during the past two weeks because of this.

Except for tuberculosis, infections and parasitic diseases appear to be uncommon on Skid Row as elsewhere in the population (typhoid fever, dysentery, venereal diseases, scarlet fever, smallpox, etc.). It is entirely possible that some of these diseases may have been present but were reported as other conditions or not reported at all. Also, cases of infectious diseases, when detected, are removed from the hotels.

To summarize: The statistics for acute conditions probably are grossly understated. Despite this, when adjusted for age and season, they show an incidence and prevalence that is about as high as the general population. It is very probable, therefore, that acute diseases have considerably higher rates than among the general population. Nevertheless, the disorders reported are of the same general type as for the general population, with a heavy emphasis on respiratory diseases. The major exception to this is injuries, fractures, wounds, etc. These occur on Skid Row at a rate that is unmistakably much higher than among the general population.

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definitions in coding the responses led to a serious understatement of the incidence and prevalence of acute conditions. Because many of the men are already seriously disabled from chronic ailments or lead very irregular lives with no fixed daily routine, and because many of them are accustomed to living throughout the winter with a common cold, to having frequent stomach upsets, etc., there was a tendency to report acute ailments but then to claim that they "did not cause them to reduce their usual activity." Moreover, Skid Row men did not visit a physician for acute ailments to the same extent as the general population. Hence, there was a tendency to report ailments with rather serious symptoms, but then to claim that a physician was not consulted. Because this bias was suspected, a record was kept of the number of acute conditions reported by the men but which were then deleted from the medical coding cycle because the man did not reduce his activity and did not see a doctor. The number of ailments reported but deleted was 88 percent of the number retained and tabulated. The rate per 1,000 men for the 2 week period preceding the interview is reported in column 4 of table 8-1. An informal review of the items shows that they are common colds, digestive upsets, injuries, wounds, diseases of the skin, and other similar conditions that the men become accustomed to treating by self-medication or that they think "will heal by themselves."

## Part II

## DISABILITY STATUS AND ITS RELATION TO DRINKING

Disability status. As described above, the illness inventory of each homeless man in the sample was reviewed by a physician, and the man was classified according to the extent of his disability. In making this classification, no account was taken of any drinking problem the man may have had. Moreover, the physician's estimates of disability were oriented toward the man's capacity to do physical labor of the type demanded of operatives, service workers, and unskilled laborers. When tabulated, the physician's classification produced the following distribution of disability status of homeless men on Skid Row:

<u>Disability status</u>	<u>Percent of homeless men</u>
Total . . . . .	100.0
Too old to work . . . . .	8.8
Unable to work . . . . .	1.5
Severely handicapped . . . . .	9.4
Moderately handicapped . . . . .	26.8
Slightly handicapped . . . . .	25.1
Not handicapped . . . . .	28.5

Thus, solely on the basis of physical health, 90 percent of the men on Skid Row are capable of doing at least some gainful work to help support themselves. Moreover, assuming that a moderately handicapped man could be placed in "sheltered" employment that would let him earn at least his minimum necessities, and that a slightly handicapped man could be fully self-supporting with only a little assistance in finding a job, etc., not less than 80 percent of the men on Skid Row could be helped to become completely self-supporting, from the point of view of physical health, if they did not have a drinking or other psychological problem. Yet in table 2-6, of Chapter 2, not less than 36 percent of the homeless men reported that they were too old to work or too disabled to work. Thus, between 15 and 25 percent of the homeless men on Skid Row are failing even to try to support themselves when actually they potentially are physically able to do so, at least in part. The notion that Skid Row is populated predominantly by helpless cripples and men too sickly to be rehabilitated is false.

On the other hand, it must be emphasized that physical handicaps are very prevalent among the residents of Skid Row--much more so than in the general population. Only one man in four (26.5 percent) is completely free from disability that would impair his working capacity at least to some extent, and almost one in ten is so severely handicapped that he is unable to hold a full-time job. More than one in four is moderately handicapped, and hence is restricted in the amounts and types of work he can do. More than one-half of the Skid Row population is physically handicapped to the extent that at least some measure of special consideration would be necessary on the part of an employer before he would provide employment, even if drinking were not involved. Here, then, is a dilemma: although the Skid Row man is much less healthy and less physically fit than the average person in the general population, yet he is not supporting himself financially to the extent to which he is potentially able according to a physician's analysis. Yet perhaps he should not be given all of the blame. Employers of unskilled and semi-skilled workers are notoriously prejudiced against middle-aged and older workmen, especially



if they have health problems or even mild handicaps, as the majority of Skid Row men have. It appears that even if highly motivated, and if the problem of drinking were completely solved, the homeless men would need to have some kind of special help in obtaining jobs if they are to become economically self-sustaining to the maximum extent.

Disability and drinking. What is the relationship between disability and drinking? Are the heaviest drinkers the most disabled or the least disabled? These are very important questions, and worthy of careful analysis. Table 8-4 furnishes detailed information with which to study them. According to this table, disability and drinking are almost, but not quite, unrelated to each other. The men who control their drinking tend to fall at the extremes: either they are severely disabled (too old, unable to work) or not disabled at all. The "moderately handicapped" and "slightly handicapped" men groups contain the highest percentage of alcoholic derelicts and heavy drinkers. The drinking classification of the large group of men with no disability has a disproportionately large share of teetotalers and light drinkers, but it also contains a substantial number of heavy drinkers.

The bottom part of table 8-4 compares the actual cross-classification of disability and drinking with a theoretical distribution in which they would be randomly distributed with respect to each other. From this table, one could conclude that for only about 4 percent of the homeless men could disability have led to above-average drinking; actually, above-average drinking may have created this amount of disability. While these differences are statistically significant and worthy of considering, they should not be over dramatized. On the one hand, they support in still another way the contention that there are many men on Skid Row who are there for reasons of poverty--primarily because of severe disability or old age. The disproportionately large share of teetotalers and light drinkers among the most severely disabled suggests that this is true. On the other hand, they lend some support to a theory that drinking is one way that disabled men sometimes take to escape the disappointments of being unable to really "make good."

If we were to simplify table 8-4 to its fundamentals, we could conclude that all Skid Row men could be grouped into four categories of drinking and disability:

	<u>Percent</u>
Men with a serious drinking problem <u>and</u> a serious disability problem . . . . .	24.
Men with a serious drinking problem <u>and</u> <u>no</u> serious disability problem . . . . .	33
Men with <u>no</u> serious drinking problem but <u>with</u> a serious disability problem . . . . .	22
Men with <u>no</u> serious drinking problem <u>and</u> <u>no</u> serious disability problem . . . . .	<u>21</u>
All men. . . . .	100

Note: In making the above classification, "moderate drinkers" were assumed to have (at least potentially) a serious drinking problem, while slightly handicapped men were assumed to have no serious disability problem.

The drinking-disability-age classification. If the men on Skid Row are to be rehabilitated, three factors would seem to stand out above all others in determining the extent to which they could be helped: their disability status, their drinking classification, and their age. By grouping all possible combinations of these three factors into the fewest possible meaningful categories, it was possible to construct

Table 8-4: Disability Status and Drinking Classification of Homeless Men: Chicago, 1957.

Disability status	Percent distribution					
	Total	Drinking classification				
		Alco- holic dere- lict	Heavy drink- er	Moderate drink- er	Light drink- er	Never drinks
<b>DISTRIBUTION BY DRINKING CLASSIFICATION</b>						
Total . . . . .	100.0	12.6	19.9	24.4	28.4	14.8
Unable to work. . . . .	100.0	8.0	20.0	12.0	24.0	36.0
Severely handicapped. . . . .	100.0	13.0	13.7	26.1	29.2	18.0
Moderately handicapped. . . . .	100.0	17.6	22.4	22.0	25.4	12.6
Slightly handicapped. . . . .	100.0	14.4	23.5	30.7	24.2	7.2
Not handicapped . . . . .	100.0	9.0	21.3	23.9	30.9	14.9
Too old to work . . . . .	100.0	4.0	4.0	15.2	41.1	35.8
<b>DISTRIBUTION BY DISABILITY STATUS</b>						
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0
Unable to work. . . . .	1.5	0.9	1.5	0.7	1.2	3.5
Severely handicapped. . . . .	9.4	9.7	6.5	10.0	9.7	11.4
Moderately handicapped. . . . .	26.8	37.5	30.2	24.2	24.0	22.8
Slightly handicapped. . . . .	25.1	28.7	29.6	31.6	21.4	12.2
Not handicapped . . . . .	28.5	20.4	30.5	28.0	31.0	28.7
Too old to work . . . . .	8.8	2.8	1.8	5.5	12.7	21.3
<b>DISTRIBUTION BY BOTH VARIABLES</b>						
Total . . . . .	100.0	12.6	19.9	24.4	28.4	14.8
Unable to work. . . . .	1.5	0.1	0.3	0.2	0.3	0.5
Severely handicapped. . . . .	9.4	1.2	1.3	2.4	2.7	1.7
Moderately handicapped. . . . .	26.8	4.7	6.0	5.9	6.8	3.4
Slightly handicapped. . . . .	25.1	3.6	5.9	7.7	6.1	1.8
Not handicapped . . . . .	28.5	2.6	6.1	6.8	8.8	4.3
Too old to work . . . . .	8.8	0.3	0.3	1.3	3.6	3.1
<b>COMPARISON OF ACTUAL WITH THEORETICAL DISTRIBUTION</b>						
Total . . . . .	...	...	...	...	...	...
Unable to work. . . . .	...	-0.1	0.0	-0.2	-0.1	0.3
Severely handicapped. . . . .	...	0.0	0.6	0.1	0.0	0.5
Moderately handicapped. . . . .	...	1.3	0.7	-0.6	-0.8	-0.6
Slightly handicapped. . . . .	...	0.4	0.9	1.6	-1.0	-1.9
Not handicapped . . . . .	...	-1.0	0.4	-0.2	0.7	0.1
Too old to work . . . . .	...	-0.8	-1.5	-0.8	1.1	1.8

a single 12-category drinking-disability-age classification that could then be used throughout this study to analyze various other aspects of the men's behavior. The categories of this classification, and the percentage of homeless men falling in each category, is as follows:

<u>Drinking-disability-age classification</u>	<u>Estimated percent of all men on Skid Row</u>
A. Severely and moderately handicapped* . . . . .	<u>46.6</u>
1. Elderly--65 years of age or older	
Teetotaler and light drinkers . . . . .	9.7
Moderate and heavy drinkers** . . . . .	4.3
2. Young and Middle-aged--20 to 64 years	
Teetotaler and light drinkers . . . . .	12.6
Moderate drinkers . . . . .	6.8
Heavy drinkers and derelicts. . . . .	<u>13.2</u>
20-44 years of age . . . . .	4.3
45-64 years of age . . . . .	8.9
B. Slightly and not handicapped . . . . .	<u>53.5</u>
1. Elderly--65 years of age or older	
Teetotaler and light drinkers . . . . .	2.3
Moderate and heavy drinkers** . . . . .	1.2
2. Young and middle-aged--20 to 64 years	
Teetotaler and light drinkers . . . . .	18.6
Moderate drinkers . . . . .	13.3
Heavy drinkers and derelicts. . . . .	<u>18.1</u>
20-44 years of age . . . . .	10.4
45-64 years of age . . . . .	7.7

\*Includes those unable to work.

\*\*Includes alcoholic derelicts.

This classification leads to the following findings that might be highly significant for those seeking to "do something" about Skid Row.

- a. Of the elderly men 65 years of age or older who comprise 17.5 percent of Skid Row's population, only about one third may be said to have a drinking problem (moderate or heavy drinkers). Of all elderly men, both those with and those without a drinking problem, about 80 percent are seriously handicapped.
- b. About one fifth of the men on Skid Row seem to be in no immediate need of physical rehabilitation or treatment for alcoholism in that they do not have a drinking problem, they are in the working ages, and have no serious handicap.
- c. The group of heavy drinkers that would seem to be the "most promising" prospects for rehabilitation are the younger men (20-44 years of age) who are not handicapped. Ten percent of the men on Skid Row (roughly 1,200 men) fall into this group.

- d. The group of heavy drinkers that are the "least promising" prospects for rehabilitation would seem to be the older men (45-64 years of age) who also have a serious physical disability. They comprise about 9 percent of all men on Skid Row.
- e. The "intermediate groups" with respect to rehabilitation are those that are (a) older but not handicapped, or (b) younger and handicapped. About 12 percent of the men fall into one of these two groups.

A little speculation with the above categories suggests that the size of Skid Row could be substantially reduced. If a program were devised that could:

- a. Provide improved low cost housing for all elderly men without a drinking problem;
- b. Provide better housing for all men with no drinking problem and no physical disability;
- c. Help all handicapped men who have no drinking problem to live at a higher standard of living through giving them rehabilitation training, helping them find jobs, or even provide employment through semi-sheltered conditions, and to live in improved low-cost housing;
- d. Rehabilitate one third of the "most promising" group, one fifth of the "intermediate" group and one tenth of the "least promising" group listed above;
- e. Commit to institutions or special homes or farms all hopelessly incurable alcoholic derelicts who have lost all capacity to care for themselves.

Such a program would shrink the size of Skid Row by roughly 70 percent. In Chicago, it would take about 8,400 men off Skid Row. The remaining core of 3,600 alcoholics and other persons that would not respond to treatment or who would refuse to be helped could easily be housed in the 8 or 10 newest and most fireproof of the men's hotels already built. Perhaps these places could be remodeled somewhat to provide more comfortable living arrangements, and operated in such a way that the offer of rehabilitation help would always be present.

If such a program were successful in working with newcomers to Skid Row, helping them before they had become enmeshed, in only a very few years the process of aging and death would lead to further shrinking of the "hard core." It is entirely possible that a coordinated 10-year program of redevelopment, rehabilitation, and treatment for alcoholism could reduce the size of Skid Row to one tenth or less of its present size, and leave even that tenth living on a much more self-supporting, humane, and more nearly "normal" plane than previously had been thought possible.

Diseases and prevalence of illness by drinking-disability-age classification. Table 8-1 provides information concerning the prevalence of illness among homeless men on Skid Row according to their drinking-disability-age classification. From this table it may be observed that:

- a. The average man who is moderately or severely handicapped has an average of three times as many different ailments as men who are only slightly or not handicapped. He suffers about 5 times as many days of restricted activity, spends 6 times as many days in bed, and loses 5 times as many days of work from sickness as the average man with no handicap or only a slight handicap.

- b. This burden of ill-health falls more heavily upon the group of young and middle-aged men who are handicapped than upon the older handicapped men aged 65 and over. The severely handicapped younger men have more ailments, spend more days of restricted activity, spend more days in bed, and lose more days of work if working than the old pensioners.
- c. Paradoxically, it is the teetotalers and light drinkers who are the most unhealthy and suffer the most. Although heavy drinkers have more different ailments per man, they have fewer days of restricted activity, fewer days in bed, and fewer days of lost work if working than the light drinkers or nondrinkers. All of this difference is due to a very high rate of illness from chronic ailments among the light drinkers and teetotalers. For every measure of illness, the chronic alcoholics have higher illness rates from acute diseases, but not from chronic diseases.

These findings have one very clear implication: Skid Row collects a substantial number of familyless men suffering from chronic ailments, and many of these men do not drink or drink very sparingly. Thus, ONE OF THE VERY LARGE GROUPS OF MEN ON SKID ROW CONSISTS OF MIDDLE-AGED NONALCOHOLIC WORKINGMEN WHO HAVE SUFFERED A BREAK-DOWN IN HEALTH, AND CAN NEITHER AFFORD TREATMENT NOR COMMAND A STEADY JOB. THEY ARE PERHAPS THE CRUELEST EXAMPLE IN OUR SOCIETY OF LACK OF PROTECTION AGAINST CHRONIC ILLNESS THAT STRIKES THROUGH NO FAULT OF THE INDIVIDUAL. Public welfare helps some of them.

What are the ailments from which the men in the various categories of the disability-drinking-age classification are suffering? Table 8-5 provides this information for chronic ailments.

The younger and middle-aged men (20-64 years of age) who are severely handicapped were suffering from the following diseases and at the following rates:

Disease	Cases per 1000 men		
	Light drinkers and teetotalers	Moderate drinkers	Heavy drinkers
Tuberculosis . . . . .	69	172	44
Asthma and hay fever . . . . .	194	103	156
Migraine and headache . . . . .	50	52	22
Ill-defined nervous and mental trouble . . . . .	143	181	169
Heart disease . . . . .	162	103	98
Hypertension . . . . .	46	181	178
Varicose veins . . . . .	69	78	93
Hemorrhoids . . . . .	106	103	98
Other diseases of circulatory system	56	17	22
Sinusitis . . . . .	162	233	209
Bronchitis . . . . .	97	52	71
Other diseases of respiratory system	42	78	98
Ulcer of stomach and duodenum . . . .	56	17	89
Hernia . . . . .	111	26	80
Other diseases of digestive system .	181	138	236
Diseases of the genito-urinary system . . . . .	134	26	62
Arthritis and rheumatism . . . . .	394	250	133
Other conditions of muscles, bones, joints . . . . .	380	328	338
Impairment of vision . . . . .	120	103	76
Impairment of hearing . . . . .	167	129	120

Table 8-5: Number of Chronic Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 1 of 2)

Chronic conditions	NHS recode number	Total all groups	SEVERELY AND MODERATELY HANDICAPPED							
			Total severely and moderately handicapped	Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
Tuberculosis, all forms . . . . .	01	33.2	60.2	18.1	...	69.4	172.4	44.4	27.4	52.6
Malignant neoplasms . . . . .	02	3.5	7.5	...	...	13.9	...	13.3	...	19.7
Benign and unspecified neoplasms . . . . .	03	1.2	...	...	...	...	...	...	...	...
Asthma and hay fever . . . . .	04	90.9	145.5	72.3	202.7	194.4	103.4	155.6	123.3	171.1
Other allergies . . . . .	05	15.7	25.1	...	40.5	27.8	77.6	8.9	27.4	...
Diabetes mellitus . . . . .	06	6.4	10.0	...	27.0	13.9	...	13.3	...	19.7
Anemia . . . . .	07	2.9	6.3	18.1	27.0	...	...	...	...	...
Headache and migraine . . . . .	08	16.3	31.4	18.1	...	50.9	51.7	22.2	68.5	...
Mental illness . . . . .	09	93.2	96.6	18.1	...	27.8	25.9	288.9	479.5	197.4
Ill-defined mental and nervous trouble . . . . .	10	90.3	135.5	90.4	40.5	143.5	181.0	168.9	205.5	151.3
Heart disease . . . . .	11	66.4	131.7	108.4	243.2	162.0	103.4	97.8	27.4	131.6
Hypertension without heart involvement . . . . .	12	66.4	117.9	72.3	148.6	46.3	181.0	177.8	246.6	144.7
Varicose veins . . . . .	13	53.6	86.6	72.3	162.2	69.4	77.6	93.3	82.2	98.7
Hemorrhoids . . . . .	14	76.9	94.1	54.2	121.6	106.5	103.4	97.8	27.4	131.6
Other diseases of the circulatory system . . . . .	15	16.3	27.6	...	40.5	55.6	17.2	22.2	...	32.9
Sinusitis . . . . .	16	123.0	181.9	144.6	162.2	162.0	232.8	208.9	246.6	190.8
Bronchitis . . . . .	17	34.4	69.0	...	162.2	97.2	51.7	71.1	27.4	92.1
Other diseases of the respiratory system . . . . .	18	50.1	72.8	54.2	121.6	41.7	77.6	97.8	109.6	92.1

Table 8-5: Number of Chronic Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 1 of 2) (continued)

Chronic conditions	NHS recode number	Total all groups	Total severely and moderately handicapped	SEVERELY AND MODERATELY HANDICAPPED						
				Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
Ulcer of stomach and duodenum . . . . .	19	28.0	50.2	18.1	40.5	55.6	17.2	88.9	191.8	39.5
Hernia. . . . .	20	81.0	116.7	234.9	121.6	111.1	25.9	80.0	82.2	78.9
Diseases of the gallbladder . . . . .	21	7.0	15.1	36.1	...	13.9	25.9	...	...	...
Constipation. . . . .	22	5.2	11.3	36.1	...	13.9	...	...	...	...
Other diseases of the digestive system . . . . .	23	102.6	165.6	108.4	81.1	180.6	137.9	235.6	328.8	190.8
Other diseases of the genito- urinary system . . . . .	26	56.5	91.6	126.5	81.1	134.3	25.9	62.2	82.2	52.6
Skin infections and diseases. . . . .	27	40.2	55.2	90.4	81.1	27.8	43.1	53.3	41.1	59.2
Arthritis and rheumatism. . . . .	28	131.7	252.2	198.8	324.3	393.5	250.0	133.3	109.6	144.7
Back conditions . . . . .	29	28.6	35.1	18.1	...	23.1	25.9	75.6	82.2	72.4
Other conditions of the muscles, bones, and joints	30	238.3	335.0	355.4	162.2	379.6	327.6	337.8	191.8	407.9
Impairment of vision. . . . .	31	69.9	120.5	210.8	81.1	120.4	103.4	75.6	41.1	92.1
Impairment of hearing . . . . .	32	119.5	175.7	265.1	243.2	166.7	129.3	120.0	82.2	138.2
Paralysis of extremities and/or trunk . . . . .	33	8.2	13.8	...	...	41.7	...	8.9	...	13.2
Absence of extremities except fingers and toes . . . . .	34	8.7	18.8	...	40.5	27.8	25.9	13.3	...	19.7
Other chronic conditions. . . . .	35	265.2	371.4	403.6	229.7	319.4	431.0	413.3	137.0	546.1
Intracranial lesions. . . . .	36	1.7	3.8	...	...	...	25.9	...	...	...

Table 8-5: Number of Chronic Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 2 of 2)

Chronic conditions	NHS recode number	Total all groups	Total slightly and not handicapped	SLIGHTLY AND NOT HANDICAPPED						
				Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
Tuberculosis, all forms . . . . .	01	33.2	9.8	...	...	9.4	26.3	...	...	...
Malignant neoplasms . . . . .	02	3.5	...	...	...	...	...	...	...	...
Benign and unspecified neoplasms. . . . .	03	1.2	2.2	...	...	...	...	6.4	11.2	...
Asthma and hay fever. . . . .	04	90.9	43.5	...	...	53.1	39.5	45.0	44.7	45.5
Other allergies . . . . .	05	15.7	7.6	...	...	6.3	13.2	6.4	...	15.2
Diabetes mellitus . . . . .	06	6.4	3.3	...	...	9.4	...	...	...	...
Anemia. . . . .	07	2.9	...	...	...	...	...	...	...	...
Headache and migraine . . . . .	08	16.3	3.3	...	...	...	...	9.6	16.8	...
Mental illness. . . . .	09	93.2	90.3	...	...	28.1	26.3	218.6	162.0	295.5
Ill-defined mental and nervous trouble. . . . .	10	90.3	51.1	...	...	68.7	35.1	54.7	67.0	37.9
Heart disease . . . . .	11	66.4	9.8	...	...	28.1	...	...	...	...
Hypertension without heart involvement. . . . .	12	66.4	21.8	...	...	9.4	26.3	35.4	33.5	37.9
Varicose veins. . . . .	13	53.6	25.0	...	142.9	34.4	13.2	19.3	16.8	22.7
Hemorrhoids . . . . .	14	76.9	62.0	...	142.9	56.3	70.2	64.3	55.9	75.8
Other diseases of the circulatory system . . . . .	15	16.3	6.5	...	...	9.4	...	9.6	...	22.7
Sinusitis . . . . .	16	123.0	71.8	...	...	62.5	74.6	93.2	89.4	98.5
Bronchitis. . . . .	17	34.4	4.4	...	...	...	8.8	6.4	11.2	...
Other diseases of the respiratory system . . . . .	18	50.1	30.5	...	...	28.1	17.5	48.2	61.5	30.3



Table 8-5: Number of Chronic Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 2 of 2) (continued)

Chronic conditions	NHS recode number	Total all groups	SLIGHTLY AND NOT HANDICAPPED							
			Total slightly and not handicapped	Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
Ulcer of stomach and duodenum . . . . .	19	28.0	8.7	...	142.9	...	...	16.1	27.9	...
Hernia. . . . .	20	81.0	50.1	76.9	...	46.9	78.9	32.2	16.8	53.0
Diseases of the gallbladder . . . . .	21	7.0	...	...	...	...	...	...	...	...
Constipation. . . . .	22	5.2	...	...	...	...	...	...	...	...
Other diseases of the digestive system . . . . .	23	102.6	47.9	...	...	90.6	21.9	32.2	27.9	37.9
Other diseases of the genito- urinary system . . . . .	26	56.5	26.1	...	...	18.8	...	57.9	55.9	60.6
Skin infections and diseases. . . . .	27	40.2	27.2	76.9	142.9	18.8	26.3	22.5	39.1	...
Arthritis and rheumatism. . . . .	28	131.7	27.2	...	...	12.5	61.4	22.5	11.2	37.9
Back conditions . . . . .	29	28.6	22.9	...	...	18.8	52.6	9.6	16.8	...
Other conditions of the muscles, bones, and joints	30	238.3	154.5	76.9	...	146.9	149.1	186.5	189.9	181.8
Impairment of vision. . . . .	31	69.9	26.1	...	...	15.6	8.8	54.7	50.3	60.6
Impairment of hearing . . . . .	32	119.5	70.7	...	...	25.0	92.1	115.8	39.1	219.7
Paralysis of extremities and/or trunk . . . . .	33	8.2	3.3	...	...	...	...	9.6	...	22.7
Absence of extremities except fingers and toes . . . . .	34	8.7	...	...	...	...	...	...	...	...
Other chronic conditions. . . . .	35	265.2	173.0	384.6	...	137.5	193.0	180.1	139.7	234.8
Intracranial lesions. . . . .	36	1.7	...	...	...	...	...	...	...	...

Table 8-6: Number of Acute Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 1 of 2)

Acute conditions	NHS recode number	Total all groups	SEVERELY AND MODERATELY HANDICAPPED							
			Total severely and moderately handicapped	Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
*Other infective and parasitic diseases . . . . .	03	1.7	3.8	...	...	...	...	13.3	...	19.7
Diseases of the ear . . . . .	04	3.5	7.5	...	...	27.8	...	...	...	...
Common cold . . . . .	05	35.0	43.9	36.1	...	27.8	77.6	62.2	41.1	72.4
Other acute upper respiratory conditions . . . . .	06	5.2	7.5	18.1	...	...	25.9	...	...	...
Other respiratory conditions. . . . .	09	36.1	54.0	72.3	...	37.0	51.7	75.6	41.1	92.1
Dental conditions . . . . .	10	5.2	7.5	...	...	13.9	25.9	...	...	...
"Intestinal flu". . . . .	12	5.2	11.3	...	...	13.9	25.9	13.3	41.1	...
Other digestive system conditions . . . . .	13	15.2	26.3	18.1	81.1	13.9	25.9	26.7	...	39.5
Headaches . . . . .	14	1.7	...	...	...	...	...	...	...	...
Genito-urinary disorders. . . . .	15	4.7	10.0	...	...	...	...	8.9	...	13.2
Diseases of the skin. . . . .	18	8.2	13.8	18.1	...	13.9	...	22.2	...	32.9
Diseases of the musculoskeletal system . . . . .	19	10.5	11.3	...	...	13.9	25.9	13.3	41.1	...
Fractures and dislocations. . . . .	20	23.9	40.2	24.1	...	13.9	155.2	31.1	27.4	32.9
Sprains and strains . . . . .	21	5.2	7.5	18.1	...	13.9	...	...	...	...
Open wounds and lacerations . . . . .	22	9.3	10.0	...	...	...	...	35.6	27.4	39.5
Contusions and superficial injuries . . . . .	23	11.7	15.1	...	...	...	25.9	40.0	41.9	39.5
Other current injuries. . . . .	24	14.6	16.3	...	20.5	23.1	...	22.2	...	32.9
All other acute conditions. . . . .	25	9.3	11.3	12.0	27.0	13.9	...	8.9	...	13.2

\*Except common childhood diseases and the "virus".

Table 8-6: Number of Acute Conditions per 1,000 Men, by Disability-Drinking-Age Classification and Type of Condition: Skid Row, Chicago: 1957. (Part 2 of 2)

Acute conditions	NHS recode number	Total all groups	Total slightly and not handicapped	SLIGHTLY AND NOT HANDICAPPED						
				Elderly - 65 years of age or older		Young and middle aged: 20 to 64 years				
				Teetotaler and light drinker	Moderate and heavy drinker	Teetotaler and light drinker	Moderate drinker	Heavy drinker and derelict		
								Total	20-44 years of age	45-64 years of age
*Other infective and parasitic diseases . . . . .	03	1.7	...	...	...	...	...	...	...	...
Diseases of the ear . . . . .	04	3.5	...	...	...	...	...	...	...	...
Common cold . . . . .	05	35.0	27.2	...	...	...	65.8	32.2	44.7	15.2
Other acute upper respiratory conditions . . . . .	06	5.2	3.3	...	...	9.4	...	...	...	...
Other respiratory conditions . .	09	36.1	20.7	...	...	25.0	...	35.4	61.5	...
Dental conditions . . . . .	10	5.2	3.3	...	...	...	13.2	...	...	...
"Intestinal flu" . . . . .	12	5.2	...	...	...	...	...	...	...	...
Other digestive system conditions . . . . .	13	15.2	5.4	...	...	...	...	16.1	16.8	15.2
Headaches . . . . .	14	1.7	3.3	...	...	9.4	...	...	...	...
Genito-urinary disorders . . . .	15	4.7	...	...	...	...	...	...	...	...
Diseases of the skin . . . . .	18	8.2	3.3	...	...	...	...	9.6	16.8	...
Diseases of the musculoskeletal system . . . . .	19	10.5	9.8	...	142.9	...	13.2	9.6	...	22.7
Fractures and dislocations . . .	20	23.9	9.8	...	142.9	...	13.2	9.6	...	22.7
Sprains and strains . . . . .	21	5.2	3.3	...	...	9.4	...	...	...	...
Open wounds and lacerations . .	22	9.3	3.7	...	...	6.3	8.8	12.9	11.2	15.2
Contusions and superficial injuries . . . . .	23	11.7	8.7	...	...	25.0	...	...	...	...
Other current injuries . . . . .	24	14.6	13.1	...	142.9	18.8	13.2	...	...	...
All other acute conditions . . .	25	9.3	7.6	...	...	...	13.2	12.9	11.2	15.2

227 \*Except common childhood diseases and the "virus".

This group of unlucky men suffer an average of 3.3 chronic conditions apiece. Not all of these cases were without care. Their pension status was as follows:

<u>Pension status</u>	<u>Percent</u>		
	<u>Teetotalers and light drinkers</u>	<u>Moderate drinkers</u>	<u>Heavy drinkers</u>
Not a pensioner. . . . .	35.6	40.5	40.4
General Public Assistant . . . . .	41.7	36.2	26.7
Retirement pension . . . . .	9.7	...	8.9
Temporary pensions, unemployment compensation. . . . .	7.4	10.3	12.9
No information . . . . .	<u>5.6</u>	<u>12.9</u>	<u>11.1</u>
Total . . . . .	100.0	100.0	100.0

Thus, at least 40 percent of them are receiving some medical aid, and simply are housed here of economic necessity or because of welfare policy.

It is estimated that Chicago's Skid Rows together contain the following number of moderately or severely handicapped men of each drinking classification:

<u>Drinking classification</u>	<u>Number of men</u>
Teetotalers and light drinkers . . . . .	1,500
Moderate drinkers. . . . .	800
Heavy drinkers and alcoholic derelicts . . . . .	<u>1,600</u>
Total . . . . .	3,900

Young and middle-aged men who are not handicapped or only slightly handicapped nevertheless reported an average of more than one chronic ailment apiece. Following are the disorders that were reported most frequently, according to the drinking classification of the men. (Men who drank more heavily reported more different disorders, but reported less disability than men who did not drink.)

<u>Chronic diseases</u>	<u>Cases per 1000 men</u>		
	<u>Teetotalers and light drinkers</u>	<u>Moderate drinkers</u>	<u>Heavy drinkers and derelicts</u>
Tuberculosis, all forms. . . . .	9	26	...
Asthma and hay fever . . . . .	53	40	45
Mental illness . . . . .	28	26	219
Ill-defined mental and nervous trouble . . . . .	69	35	55
Heart disease. . . . .	28	...	...
Hypertension . . . . .	9	26	35
Varicose veins . . . . .	34	13	19
Hemorrhoids. . . . .	56	70	64
Sinusitis. . . . .	63	75	93
Miscellaneous respiratory diseases . . . . .	28	18	48
Hernia . . . . .	50	79	32
Other diseases of digestive system . . . . .	91	22	32
Arthritis. . . . .	12	61	22
Back conditions. . . . .	18	53	10
Other conditions of muscles, bones, joints. . . . .	147	149	181
Impairment of hearing. . . . .	25	92	116

Even though these men are reported as being "not handicapped" or "slightly handicapped" it is evident that they suffer from a variety of minor and more serious chronic ailments at rates that are not found in the general population. They show much evidence of being in substandard physical health and many of them are in poor mental health.

#### THE DENTAL CONDITION OF MEN ON SKID ROW

During the interview, a subsample (75 percent of the total sample) of the men was asked:

- a. How many teeth have you pulled or had knocked out?
- b. How many teeth have you had replaced by dental work?
- c. How long has it been since you went to a dentist?
- d. Are your teeth bothering you now or do you need to have dental work done?

From the responses to these questions, it is possible to build up a general over all picture of the dental condition of Skid Row residents.

<u>Dental condition</u>	<u>Percent of all men</u>
Total. . . . .	<u>100.0</u>
Edentate (has lost all teeth, none replaced). . . . .	16.9
Has 10 or more teeth missing, not replaced. . . . .	23.7
Has 5-9 teeth missing, not replaced . . . . .	12.9
Has 1-4 teeth missing, not replaced . . . . .	22.4
Has full set of dentures. . . . .	11.1
Has all of own teeth or all lost teeth replaced . . . . .	8.2
No information. . . . .	4.7

Note: Missing wisdom teeth, teeth replaced by bridgework, and partial plates were not counted as missing teeth.

Probably it would be difficult to find a segment of the population with worse average dental condition. On Skid Row, teeth are badly neglected, they are lost in fights or in the process of being jackrolled, and are not often replaced when lost.

Following is the distribution of length of time since a dentist was last seen:

<u>Length of time</u>	<u>Percent of men with some of own teeth remaining</u>
Total. . . . .	<u>100.0</u>
5 years or more . . . . .	48.7
2 to 4 years. . . . .	21.1
1 to 2 years. . . . .	11.3
Less than 1 year. . . . .	13.3
No answer . . . . .	5.8

Of those who had seen a dentist within the past year, very little preventive dentistry was purchased; the majority of those who went did so to have aching teeth pulled. This is the general practice among homeless men. They lack the money to have cavities filled, and never visit the dentist except to have teeth pulled. At least one of the missions provides free tooth-pulling service; a man with an aching tooth attends the service and afterward (on selected nights of the week) can have a dentist (who kindly donates his services) pull the tooth.

When asked if they needed to have dental work done now, 49.6 percent of the men who still had one or more of their own teeth left reported "yes." This probably means that they believed they needed to have another tooth pulled.

Tables 8-7 and 8-8 show how dental condition varies with other characteristics of the men. (a) The older the man, the more deteriorated tend to be his teeth. Among men 65 years of age or over, 41 percent were toothless and without dentures, and an additional 29 percent had lost 10 teeth or more without having them replaced. Dental decay sets in at an early age. Even men 35-44 years of age had high percentages of missing teeth. One man in 13 among this group was already toothless and without dentures, and an additional one in seven had lost ten or more teeth without replacing them. Only 11 percent of the men in this age range had lost no teeth or had replaced all they had lost. (b) The dental condition of men who are seriously disabled or who have severe chronic ailments is much worse than that of men who are not handicapped. (c) Among the men who are not handicapped or only slightly handicapped, the dental condition of the men who drink heavily is worse than that of men who do not drink so heavily. (d) The teeth of pensioners on general public assistance were in a very deteriorated state: Almost one third were toothless without dentures and an additional one fourth had lost 10 teeth or more without replacement.

Table 8-7 Summary of Dental Condition of Skid Row Men, by Selected Characteristics, Chicago, 1957. (Part 1 of 2)

Item	Total	Summary						
		Has false teeth	Has no teeth	10 or more teeth missing	5-9 teeth missing	1-4 teeth missing	All teeth present or replaced	No answer
<b>AGE</b>								
Total. . . . .	100.0	11.1	16.9	23.7	12.9	22.4	8.2	4.7
20-34 years. . . . .	100.0	...	...	16.0	20.2	41.2	21.0	1.7
35-44 years. . . . .	100.0	3.7	7.7	14.8	18.5	41.0	11.4	2.8
45-54 years. . . . .	100.0	13.1	15.5	30.6	10.5	18.0	6.7	5.6
55-64 years. . . . .	100.0	13.3	19.2	24.6	12.9	12.1	7.1	5.8
65 years and over. . . . .	100.0	17.1	40.5	28.6	4.3	2.9	...	6.7
<b>DRINKING-DISABILITY-AGE</b>								
Total. . . . .	100.0	11.1	16.9	23.7	12.9	22.4	8.2	4.7
<b>A. Severely and moderately handicapped . . . . .</b>								
1. Elderly--65 years of age or older. . . . .	100.0	15.1	25.1	27.4	8.7	13.9	3.8	6.0
Teetotalers and light drinkers. . . . .	100.0	19.6	43.5	21.4	5.4	3.6	...	6.5
Moderate and heavy drinkers . . . . .	100.0	26.1	47.8	20.8	2.6	...	...	2.6
2. Young and middle aged--20-64 years . . . . .	100.0	5.7	34.0	22.6	11.3	11.3	...	15.1
Teetotalers and light drinkers. . . . .	100.0	13.3	17.9	29.8	10.0	17.9	5.3	5.8
Moderate drinkers . . . . .	100.0	16.6	22.1	37.4	5.5	11.0	5.5	1.8
Heavy drinkers and derelicts. . . . .	100.0	6.2	18.6	27.8	12.4	20.6	8.2	6.2
20-44 years of age. . . . .	100.0	14.1	13.5	23.5	12.9	22.9	3.5	9.4
45-64 years of age. . . . .	100.0	...	10.5	10.5	19.3	38.6	5.3	15.8
B. Slightly and not handicapped. . . . .	100.0	21.2	15.0	30.1	9.7	15.0	2.7	6.2
1. Elderly--65 years of age or older. . . . .	100.0	7.6	9.6	20.4	16.6	30.1	12.1	3.6
Teetotalers and light drinkers. . . . .	100.0	7.1	28.6	57.1	...	...	...	7.1
Moderate and heavy drinkers . . . . .	100.0	11.1	11.1	66.7	...	...	...	11.1
2. Young and middle aged--20-64 years . . . . .	100.0	...	60.0	40.0	...	...	...	...
Teetotaler and light drinkers . . . . .	100.0	7.7	8.3	17.9	17.7	32.1	12.9	3.4
Moderate drinkers . . . . .	100.0	8.7	5.8	17.9	16.7	35.8	13.7	1.2
Heavy drinkers and derelicts. . . . .	100.0	6.1	8.1	12.8	23.6	21.6	18.9	8.9
20-44 years of age. . . . .	100.0	7.6	10.9	21.0	15.1	34.9	8.4	2.1
45-64 years of age. . . . .	100.0	2.2	7.2	13.7	18.0	46.8	10.8	1.4
	100.0	15.2	16.2	31.3	11.1	18.2	5.1	3.0

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Table 8-7 Summary of Dental Condition of Skid Row Men, by Selected Characteristics, Chicago, 1957. (Part 2 of 2)

Item	Total	Summary						
		Has false teeth	Has no teeth	10 or more teeth missing	5-9 teeth missing	1-4 teeth missing	All teeth present or replaced	No answer
<b>PENSION STATUS</b>								
Total . . . . .	100.0	10.6	17.3	23.3	13.1	22.7	8.7	4.3
Not a pensioner. . . . .	100.0	8.8	9.3	24.4	16.3	26.5	11.1	3.7
Pension--General Public Assistance . . . . .	100.0	11.9	32.0	26.1	7.1	13.4	8.3	1.2
Pension--Retirement. . . . .	100.0	21.8	34.5	12.7	5.5	15.2	1.8	8.5
Temporary pensions--unemployment compensation . . . . .	100.0	2.4	7.1	26.2	18.3	31.7	5.6	8.7
<b>NUMBER OF DIFFERENT AILMENTS</b>								
Total . . . . .	100.0	11.1	16.9	23.7	12.9	22.4	8.2	4.7
None . . . . .	100.0	7.8	8.5	16.7	13.0	30.0	18.1	5.9
One ailment. . . . .	100.0	7.2	14.8	24.2	14.4	25.6	10.5	3.2
Two ailments . . . . .	100.0	10.0	19.9	21.1	15.1	23.5	6.0	4.4
Three ailments . . . . .	100.0	21.7	23.7	25.6	13.0	9.7	2.4	3.9
Four ailments. . . . .	100.0	3.2	15.8	32.6	15.8	20.0	3.2	9.5
Five and more ailments . . . . .	100.0	16.3	21.7	30.7	4.8	20.5	1.8	4.2

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Table 8-8: Length of Time Since Skid Row Men Last Visited Dentist, by Selected Characteristics, Chicago, 1957.

Item	Visited dentist						Percent needing dental help
	Total	5 years or more	2-4 years	1-2 years	Less than 1 year	No answer	
<b>AGE</b>							
Total . . . . .	100.0	48.4	21.1	11.3	13.3	5.8	49.6
20-34 years. . . . .	100.0	33.6	35.3	9.2	17.6	4.2	59.8
35-44 years. . . . .	100.0	36.7	26.2	13.0	20.1	4.0	50.7
45-54 years. . . . .	100.0	53.4	16.9	12.6	11.8	5.4	57.9
55-64 years. . . . .	100.0	50.8	20.8	12.9	8.7	6.7	39.4
65 years and over. . . . .	100.0	63.3	12.9	5.7	8.6	9.5	31.0
<b>DRINKING-DISABILITY-AGE CLASSIFICATION</b>							
Total . . . . .	100.0	48.4	21.1	11.3	13.3	5.8	49.6
A. Severely and moderately handicapped . . . . .	100.0	52.8	18.2	11.4	12.0	5.5	54.2
1. Elderly--65 years of age or older. . . . .	100.0	64.9	12.5	3.6	10.7	8.3	34.9
Teetotalers and light drinkers. . . . .	100.0	72.2	15.7	...	5.2	7.0	33.3
Moderate and heavy drinkers . . . . .	100.0	49.1	5.7	11.3	22.6	11.3	40.3
2. Young and middle-aged--20 to 64 years. . . . .	100.0	48.1	20.5	14.4	12.6	4.4	59.0
Teetotalers and light drinkers. . . . .	100.0	51.5	17.8	12.9	12.9	4.9	54.5
Moderate drinkers . . . . .	100.0	42.3	27.8	11.3	15.5	3.1	62.4
Heavy drinkers and derelicts. . . . .	100.0	48.2	18.8	17.6	10.6	4.7	60.9
20-44 years of age. . . . .	100.0	42.1	24.6	14.0	14.0	5.3	76.6
45-64 years of age. . . . .	100.0	51.3	15.9	19.5	8.8	4.4	52.7
B. Slightly and not handicapped. . . . .	100.0	44.5	23.7	11.2	14.5	6.1	46.2
1. Elderly--65 years of age or older. . . . .	100.0	57.1	14.3	14.3	...	14.3	20.0
Teetotalers and light drinkers. . . . .	100.0	44.4	22.2	22.2	...	11.1	33.3
Moderate and heavy drinkers . . . . .	100.0	80.0	...	...	...	20.0	...
2. Young and middle-aged--20 to 64 years. . . . .	100.0	43.6	24.3	11.0	15.5	5.6	47.7
Teetotalers and light drinkers. . . . .	100.0	40.4	27.5	12.9	16.7	2.5	45.7
Moderate drinkers . . . . .	100.0	49.3	22.3	7.4	11.5	9.5	52.8
Heavy drinkers and derelicts. . . . .	100.0	43.3	22.3	11.3	16.8	6.3	46.6
20-44 years of age. . . . .	100.0	34.5	29.5	15.8	12.9	7.2	45.7
45-64 years of age. . . . .	100.0	55.6	12.1	5.1	22.2	5.1	48.1

## PART III.

POTENTIALITIES FOR IMPROVING THE HEALTH  
AND RELIEVING THE DISABILITIES OF SKID ROW MEN

After he had rated each man into one of the disability categories, the physician was asked to imagine that each man were to be given all of the "standard" types of medical treatment and care that his condition indicated was needed, omitting extremely costly items that these men could not possibly afford. Then, presuming that such treatment were somehow provided, the physician was asked to rate each man again according to his estimate of how handicapped he would still be after the treatment. The same categories and assumptions made in the original rating were applied in the estimation of the extent of physical disability that would remain after medical treatment. It was assumed that if there were a problem of alcoholism, it would be solved by another program. This yielded the best estimate possible of the potential for physical rehabilitation of the men, apart from drinking problems. Following is a tabulation of the results:

<u>Rehabilitation status</u>	<u>Percent of the men</u>	<u>Implied number of men on Skid Rows of Chicago</u>
<u>No change after medical treatment</u>		
Too old to work . . . . .	8.8	1,049
Unable to work, both before and after . . . . .	1.2	143
Severely handicapped, both before and after . . . . .	5.7	680
Moderately handicapped, both before and after . . . . .	14.3	1,705
Slightly handicapped, both before and after . . . . .	8.5	1,014
<u>Rehabilitation status improved by treatment</u>		
Rehabilitated to be only moderately handicapped . . . . .	3.6	429
Rehabilitated to be only slightly handicapped . . . . .	11.9	1,419
Rehabilitated to be not handicapped at all. . . . .	17.5	2,087
<u>Originally not handicapped, no treatment needed</u> . . . . .	28.5	3,399

Thus, a program of medical treatment would not only improve the well-being of a number of unhealthy men. It would also substantially improve the potential earning power of 33 percent of the homeless men on Chicago's Skid Rows. This is roughly 4,000 men. The drastic change that could be effected may be noted by comparing the percentage distribution by disability status before and after treatment:

<u>Disability status</u>	<u>Before treatment</u>	<u>After treatment</u>	<u>Change (points)</u>
Too old to work, unable to work . . . . .	10.2	10.0	- 0.2
Severely handicapped . . . . .	9.4	5.7	- 3.7
Moderately handicapped . . . . .	26.8	17.9	- 8.9
Slightly handicapped . . . . .	25.1	20.4	- 4.7
Not handicapped . . . . .	28.5	46.0	17.5

After such a treatment program, almost one-half of the men would not be physically handicapped, and almost a third of those who had been either severely handicapped or moderately handicapped were transferred to the "slightly handicapped" category. THUS, A SYSTEMATIC PROGRAM OF MEDICAL TREATMENT FOR THE PURPOSE OF REHABILITATION COULD LITERALLY TRANSFORM THOUSANDS OF THE SKID ROW MEN FROM DEPENDENT, UNEMPLOYABLE, CAST-OFF DREGS ON THE LABOR MARKET TO SELF-SUSTAINING EARNERS. IT COULD MAKE PARTIALLY SELF-SUPPORTING (OR EVEN ENTIRELY SELF-SUPPORTING WORKERS UNDER SHELTERED CONDITIONS) HUNDREDS OF MEN WHO ARE NOW SEVERELY HANDICAPPED. SUCH A PROGRAM MUST BE ACCOMPANIED, OF COURSE, BY A PROGRAM FOR TREATMENT FOR ALCOHOLISM WHERE THE MAN IS A HEAVY DRINKER. As has already been shown, however, many of the handicapped men are not alcoholic.

#### HOW MUCH WOULD A PROGRAM OF MEDICAL REHABILITATION COST?

The question immediately arises, "How much would it cost to provide the rehabilitation treatment estimated by the physician's diagnosis and prescription?" In order to make the statistics concrete, they have been expressed in the cost per man, instead of total costs to provide care to all of the men on Skid Row. This approach also makes it possible to answer questions concerning "How many men could be rehabilitated for how many dollars?" Table 8-9 provides the necessary information for a variety of categories of men. For an average Skid Row man, with an average amount of disease and disability, the medical care required would be as follows:

<u>Medical care required</u>	<u>Average per man</u>
Days in hospital . . . . .	5.6
Days as outpatient . . . . .	2.1
Follow-up visits to clinic . . . . .	4.7
 Total cost . . . . .	 \$242
Hospitalization . . . . .	105
Cost of clinic visits . . . . .	37
Cost of surgeon . . . . .	27
Cost of drugs . . . . .	74
 Time from work (if working). . . . .	 2.1 weeks

The cost of rehabilitating a younger man is less than that of rehabilitating a middle-aged or older man, because they have fewer ailments. The cost of rehabilitating a teetotaler is about the same as that of rehabilitating a moderate drinker; although the cost of "patching up" an alcoholic derelict is considerably greater, because they have more ailments and more serious ailments. A better idea of the cost may be obtained by classifying them according to the rehabilitation status:

<u>Change in medical status</u>	<u>Cost</u>	<u>Estimated number of men in Chicago</u>	<u>Estimated total cost (thousands of dollars)</u>
<u>No change after medical treatment</u>			
Too old to work . . . . .	\$170	1049	\$178
Unable to work, both before and after .	380	143	54
Severely handicapped, both before and after. . . . .	892	680	607
Moderately handicapped, both before and after. . . . .	315	1705	537
Slightly handicapped, both before and after. . . . .	135	1014	137
<u>Improved by medical treatment</u>			
Improved to be moderately handicapped .	1625	429	697
Improved to be slightly handicapped . .	303	1419	430
Improved to be not handicapped at all .	193	2087	403

The total cost of such a program, if carried out for all categories of men, adds to 3.0 million dollars. This is a staggering figure. On the one hand it measures how much it would cost the taxpayer to remedy the health situation of these men; on the other hand it measures just how much in need of help these men are. From some viewpoints it is reasonable and modest in size. It figures out to be about two months pay of the 4,050 men whose rehabilitation status would be improved by such a program. One man kept on General Public Assistance for one year costs the City and State about \$1,000. This amount could rehabilitate 3 moderately handicapped men to a point where they would be only slightly handicapped, and could rehabilitate 5 slightly handicapped men to a point where they are not handicapped at all. Rehabilitation now would keep many of these men off General Public Assistance a few years from now.

It must be emphasized that the materials of this chapter make it clear that if a program of medical rehabilitation is undertaken, it must be much more than just a first-aid station set up along Skid Row to take care of emergency wounds and administer antibiotics--although there is a genuine place for that kind of medical help too. This program would require the kind of medical treatment that repairs hernias, treats ulcers and other chronic digestive ailments, brings down high blood pressure, correct prostate trouble, and diminishes the disabling effects, insofar as possible, of other chronic ailments. It requires regular hospital facilities, with a staff of specialists and expert diagnosticians.

And, it must be reemphasized, none of this program includes treatment for alcoholism. Neither does it include provision of badly needed dental care.

Table 8-9: Medical Care Needed, Cost of Needed Medical Care, and Time From Work Required to Obtain Needed Medical Care; Various Categories of Skid Row Men, Chicago: 1957. (Part 1 of 4)

Item	Medical care needed per 100 men				Cost of needed care (dollars per man)					Time from work (weeks per 100 men)
	Days in hospital	Days as out-patient	Follow-up visits	Total doctor-clinic visits	Total cost	Cost of hospitalization	Cost of clinic	Cost of surgery	Cost of drugs	
<b>AGE</b>										
Total, all ages. . . . .	566	211	465	746	242	105	37	27	74	211
20-34 years. . . . .	251	167	250	417	128	47	21	17	44	101
35-44 years. . . . .	476	215	431	808	214	88	40	15	70	161
45-54 years. . . . .	636	247	544	834	279	117	41	35	86	259
55-64 years. . . . .	974	277	731	1108	386	180	54	41	110	323
65 and over. . . . .	304	99	211	310	128	56	15	20	36	142
<b>DRINKING CLASSIFICATION</b>										
Total. . . . .	566	211	465	746	242	105	37	27	74	211
Teetotaler . . . . .	557	151	473	753	244	103	37	33	71	201
Light drinker. . . . .	355	182	350	531	168	66	26	18	58	164
Moderate drinker . . . . .	723	223	538	919	286	134	45	26	81	270
Heavy drinker. . . . .	413	239	438	677	212	76	34	27	76	159
Alcoholic derelict . . . . .	986	282	615	998	371	183	49	44	95	299
<b>DRINKING-DISABILITY-AGE CLASSIFICATION</b>										
Total. . . . .	566	211	465	746	242	105	37	27	74	211
A. Severely and moderately handicapped. . . . .	1098	272	805	1228	429	203	60	45	120	392
1. Elderly - 65 years of age or older . . . . .	359	107	247	354	148	66	17	22	42	161
Teetotaler and light drinker. . . . .	268	89	175	264	113	50	13	20	30	134
Moderate and heavy drinker. . . . .	564	146	410	555	225	104	26	26	68	223

Table 8-9: Medical Care Needed, Cost of Needed Medical Care, and Time From Work Required to Obtain Needed Medical Care; Various Categories of Skid Row Men, Chicago: 1957. (Part 2 of 4)

Item	Medical care needed per 100 men				Cost of needed care (dollars per man)					Time from work (weeks per 100 men)
	Days in hospital	Days as out-patient	Follow-up visits	Total doctor-clinic visits	Total cost	Cost of hospitalization	Cost of clinic	Cost of surgery	Cost of drugs	
DRINKING-DISABILITY-AGE CLASSIFICATION (continued)										
A2. Young and middle aged: 20-64 yrs.	1417	344	1045	1605	550	262	78	55	153	492
Teetotaler and light drinker.	1081	302	931	1385	452	200	67	43	141	418
Moderate drinker. . . . .	2055	382	1371	2322	737	380	112	53	186	706
Heavy drinkers and derelicts.	1411	364	986	1447	549	261	72	69	148	453
20-44 years of age. . . . .	999	358	734	1092	426	185	55	66	122	364
45-64 years of age. . . . .	1609	367	1107	1618	608	298	80	70	160	495
B. Slightly and not handicapped. .	103	158	170	328	81	19	17	11	34	54
1. Elderly - 65 years of age or older . . . . .	85	70	65	135	50	16	7	12	14	85
Teetotaler and light drinker.	77	54	54	108	43	14	5	77	15	46
Moderate and heavy drinker. .	100	100	86	186	61	19	10	21	11	100
2. Young and middle aged: 20-64 yrs.	105	164	177	342	83	19	18	11	36	54
Teetotaler and light drinker.	105	140	182	322	81	19	16	13	33	52
Moderate drinker. . . . .	125	169	171	340	87	23	18	13	34	71
Heavy drinker and derelict. .	90	187	177	364	82	16	19	7	39	43
20-44 years of age. . . . .	74	169	159	328	72	14	17	4	38	30
45-64 years of age. . . . .	111	211	202	412	96	20	21	13	41	61
PENSION STATUS										
Total . . . . .	566	211	465	746	242	105	37	27	74	211
Not a pensioner. . . . .	389	196	384	617	186	72	31	21	63	152
Pension: Gen'l. Public Assistance.	1251	275	906	1458	474	232	71	42	128	434
Pension: retirement. . . . .	508	153	290	446	192	94	22	24	53	182
Temporary pension: unemployment. .	290	232	294	526	171	54	26	34	57	136
compensation. . . . .	290	232	294	526	171	54	26	34	57	136
No information . . . . .	647	274	581	856	290	120	43	36	91	261

Table 8-9: Medical Care Needed, Cost of Needed Medical Care, and Time From Work Required to Obtain Needed Medical Care; Various Categories of Skid Row Men, Chicago: 1957. (Part 3 of 4)

Item	Medical care needed per 100 men				Cost of needed care (dollars per man)					Time from work (weeks per 100 men)
	Days in hospital	Days as out-patient	Follow-up visits	Total doctor-clinic visits	Total cost	Cost of hospitalization	Cost of clinic	Cost of surgery	Cost of drugs	
<b>VETERAN STATUS</b>										
Total . . . . .	491	212	442	722	226	91	36	27	72	181
No military service . . . . .	467	206	445	742	219	86	36	23	74	173
Military service before World War II	1034	246	695	1082	398	191	53	56	97	383
World War II . . . . .	287	220	340	560	165	53	28	20	64	106
Military service after World War II	116	155	150	305	83	22	16	12	34	54
No information . . . . .	340	207	557	763	189	63	39	13	75	63
<b>EMPLOYMENT STATUS</b>										
Total . . . . .	566	211	465	746	242	105	37	27	74	211
Employed - steady job . . . . .	170	161	264	425	112	31	21	14	46	76
Employed - spot job . . . . .	290	218	324	542	168	54	28	24	65	112
Unemployed . . . . .	278	221	360	582	158	51	29	20	58	110
Not in labor force:										
Unable to work . . . . .	1041	198	739	1170	392	193	56	36	104	359
Did not care to work . . . . .	760	266	448	714	288	141	35	37	76	234
Possibly in labor force - temporarily ill . . . . .	1922	302	1049	1671	653	355	81	64	150	826
<b>DISABILITY STATUS</b>										
Total . . . . .	566	211	465	746	242	105	37	27	74	211
Too old to work . . . . .	...	...	...	...	...	...	...	...	...	...
Unable to work . . . . .	1080	192	880	1072	460	201	54	64	142	240
Severely handicapped . . . . .	3563	332	1905	2985	1170	660	143	104	256	1234
Moderately handicapped . . . . .	597	345	680	1025	309	110	51	39	110	235
Slightly handicapped . . . . .	221	306	344	649	163	40	33	24	57	115
Not handicapped . . . . .	...	29	17	46	8	...	3	...	6	1

Table 8-9: Medical Care Needed, Cost of Needed Medical Care, and Time From Work Required to Obtain Needed Medical Care: Various Categories of Skid Row Men, Chicago: 1957. (Part 4 of 4)

Item	Medical care needed per 100 men				Cost of needed care (dollars per man)					Time from work (weeks per 100 men)
	Days in hospital	Days as out-patient	Follow-up visits	Total doctor-clinic visits	Total cost	Cost of hospitalization	Cost of clinic	Cost of surgery	Cost of drugs	
REHABILITATION CLASSIFICATION										
Total . . . . .	566	211	465	746	242	105	37	27	74	211
No change after medical treatment.	367	153	341	522	170	68	26	16	60	127
Too old to work . . . . .	...	...	...	...	...	...	...	...	...	...
Both before and after:										
Unable to work . . . . .	825	165	725	890	380	154	45	80	102	150
Severely handicapped . . . . .	2477	344	1632	2313	892	459	113	74	245	826
Moderately handicapped . . . . .	606	345	682	1027	315	112	50	33	119	226
Slightly handicapped . . . . .	108	271	291	562	135	20	28	12	76	48
Not handicapped . . . . .	...	29	17	46	8	...	3	...	6	1
Rehabilitation status improved after medical treatment . . . . .	968	330	716	1201	389	179	59	49	102	382
Rehabilitated to be:										
Moderately handicapped . . . . .	5264	316	2411	4144	1625	925	196	145	294	1839
Slightly handicapped . . . . .	586	348	689	1037	303	103	51	42	103	228
Not handicapped . . . . .	341	321	385	707	193	62	36	34	62	186



## SUMMARY

Residents of Skid Row are disabled from illness to a far greater extent than the general male population of the same ages. This excess of illness is not due so much to acute and infectious diseases (although it is suspected that the prevalence of acute diseases is considerably greater than reported in the survey) as to chronic ailments. A high percentage of the men suffer from severe and multiple chronic disorders, and as a consequence are partially disabled or handicapped for employment. A substantial number of these people are teetotalers or only light drinkers; they seem to live on Skid Row because they are poor, and seem to be poor because they are chronically ill. Among the heavy drinkers, alcoholism is complicated by chronic sickness in a substantial proportion of cases; rehabilitation of such men would require a double-barreled approach of medical care and treatment for alcoholism. However, a substantial share of the problem drinkers are only slightly handicapped physically or are not handicapped at all.

A high percentage of the men on Skid Row are in need of medical care they are not able to afford. In a high percentage of cases, the disorders from which they suffer could be greatly relieved and rendered much less disabling by appropriate medical treatment. If, as a part of a rehabilitation and renewal program, there were to be a program of medical rehabilitation it could greatly reduce the amount of physical disability and greatly increase the employability of the men. For certain categories of men who are not chronic alcoholics (for example, nonalcoholic workmen suffering from hernia), a great deal of rehabilitation could be accomplished at moderate cost.

## Chapter 9

### THE WORKINGMAN ON SKID ROW

Of the residents of Skid Row that fell in the sample of this study only 4 out of every 10 worked at any job during the week preceding their interview. Other chapters of this report deal primarily with the 6 of each 10 men who were not working, but this chapter focuses upon the homeless men who are wage earners. Work status was determined on two bases: (a) those who had worked during the week preceding the interview and (b) those who had worked at some time during the preceding year. Statistics collected on each of these bases are discussed in the following pages.

Work status and drinking classification. As table 9-1 shows (see also table 6-1 in Chapter 6), it is neither the teetotalers nor the light drinkers who are most likely to be employed. Instead, it is the moderate drinkers who have the highest percentage of men working. (Teetotalers and light drinkers are often old or disabled men who are retired or cannot work, and a high percentage of alcoholic derelicts are incapable of working or else are not inclined to work.) But none of the drinking classes contain a majority of working men; less than one half of the men in any drinking classification had worked during the preceding week. Hence, drinking is only one of possibly several factors that make men on Skid Row unable or indisposed to work.

Nevertheless, if a man does work there are very definite interrelationships between his drinking classification and the amount of work he gets and the types of jobs he holds. Unemployment rates are much higher among those who drink freely or excessively than among those who do not. And an extraordinarily high percentage (30 percent) of alcoholic derelicts frankly stated that they had not cared to work during the preceding week. Working men who are light drinkers or moderate drinkers are much more inclined to hold steady jobs than those who are heavy drinkers or alcoholic derelicts. If they are employed at all, heavy drinkers and derelicts are more likely to be employed on a day-to-day basis as spot job workers.

Disability and drinking in relation to work status. Among Skid Row men, age and physical disability are much stronger deterrents to working than is drinking. This may be verified from table 9-2, where only a small percentage of men 65 and over and of men who are severely or moderately handicapped are reported as employed--irrespective of their drinking status. Nevertheless, moderate or heavy drinking has an independent additional effect which tends to reduce the proportion of men who are employed. Thus, the group of men on Skid Row who are the most actively engaged in working are the younger ones who are not handicapped and who are not heavy drinkers (64 percent of this group had worked in the week preceding the interview). Among the not-handicapped men of working ages it is the heavy drinkers and alcoholic derelicts who are working least. But the employment-destroying effect of drinking appears to be much smaller than the effects of age and physical disability.

Involuntary unemployment is perhaps the most important single factor that explains why large numbers of men had not worked during the week preceding their interview. (It is much more difficult to evaluate the validity of the responses concerning unemployment according to drinking status, because a heavy drinker may merely have reported himself as unemployed when actually he may have been on a drinking spree and not interested in working. This limitation does not apply to light drinkers, however, and rates of unemployment were very high, even among able-bodied young men who were only light drinkers (24 percent of such men were unemployed).) As mentioned in a previous chapter, there is a very great seasonal fluctuation in Skid Row employment.

Table 9-1: Employment Status of Homeless Men According to Their Drinking Classification: Chicago's Skid Row, 1957.

Employment status	Skid Row total	Drinking classification				
		Tee-total-ers	Light drink-ers	Moderate drink-ers	Heavy drink-ers	Alcoholic dere-licts
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0
Employed . . . . .	39.8	31.4	39.2	43.8	40.7	25.9
Steady job . . . . .	21.9	15.7	24.4	27.5	20.8	13.9
Spot job . . . . .	17.9	15.7	14.8	16.3	29.9	12.0
Unemployed . . . . .	23.4	11.0	21.8	25.4	29.3	28.2
Did not care to work . . . . .	9.0	8.3	7.4	4.5	4.4	29.6
Temporarily ill . . . . .	6.1	5.5	6.2	7.2	5.9	4.6
Not in labor force . . . . .	21.7	43.7	25.5	19.1	9.7	11.6

Table 9-2: Employment Status of Homeless Men According to Drinking-Disability-Age Classification: Chicago Skid Row, 1957.

Drinking-disability-age classification	Total	Employment status							Ratio steady to total employment
		Employed			Unem- ployed	Did not care to work	Tempo- rarily ill	Not in labor force	
		Total employed	Steady job	Spot job					
Total . . . . .	100.0	39.8	21.9	17.9	23.4	9.0	6.1	21.7	55.0
A. SEVERELY AND MODERATELY HANDICAPPED . . .	100.0	21.7	9.3	12.4	15.6	10.0	10.8	41.9	42.9
1. Elderly -- 65 years of age and older	100.0	11.3	5.0	6.3	1.3	7.5	3.3	76.7	44.2
Teetotaler and light drinkers . . . . .	100.0	7.2	3.6	3.6	...	5.4	3.0	84.3	50.0
Moderate and heavy drinkers . . . . .	100.0	20.3	8.1	12.2	4.1	12.2	4.1	59.5	39.9
2. Young and middle aged -- 20-64 years	100.0	26.2	11.1	15.1	21.7	11.1	14.0	26.9	42.4
Teetotaler and light drinkers . . . . .	100.0	22.2	9.7	12.5	21.3	6.9	15.3	34.3	43.7
Moderate drinkers . . . . .	100.0	33.6	21.6	12.1	17.2	2.6	18.1	28.4	64.3
Heavy drinkers and derelicts . . . . .	100.0	26.2	7.1	19.1	24.4	19.6	10.7	19.1	27.1
20-44 years . . . . .	100.0	43.8	12.3	31.5	30.1	15.1	11.0	...	28.1
45-64 years . . . . .	100.0	17.8	4.6	13.2	21.7	21.7	10.5	28.3	25.8
B. SLIGHTLY AND NOT HANDICAPPED . . . . .	100.0	55.5	32.8	22.7	30.1	8.2	2.0	4.2	59.1
1. Elderly -- 65 years of age and older	100.0	30.0	20.0	10.0	25.0	25.0	...	20.0	66.7
Teetotaler and light drinkers . . . . .	100.0	15.4	15.4	...	30.8	30.8	...	23.1	100.0
Moderate and heavy drinkers . . . . .	100.0	57.1	28.6	28.6	14.3	14.3	...	14.3	50.1
2. Young and middle aged -- 20-64 years	100.0	57.3	33.6	23.6	30.5	7.0	2.1	3.1	58.6
Teetotaler and light drinkers . . . . .	100.0	64.1	39.4	24.7	23.8	6.6	1.9	3.8	61.5
Moderate drinkers . . . . .	100.0	53.9	35.5	18.4	35.1	4.4	2.6	3.9	65.9
Heavy drinkers and derelicts . . . . .	100.0	52.7	26.4	26.4	34.1	9.3	1.9	1.9	50.1
20-44 years . . . . .	100.0	52.0	22.3	29.6	33.0	13.4	1.7	...	42.9
45-64 years . . . . .	100.0	53.8	31.8	22.0	35.6	3.8	2.3	4.5	59.1

6.

High unemployment rates are very common during the winter months. Hence, even though a resident of Skid Row may be most eager to work, does not drink, and is physically qualified, throughout much of the year there are not enough jobs to go around, and at the depths of the winter slow down in hiring he cannot count on a full week's work, or even on getting some work every week. Seasonal fluctuations in the demand for common labor in industries that make use of Skid Row workers seem to be extraordinarily sharp.

Almost all of the men on Skid Row (under 65 years of age), even the heavy drinkers, are potential workers: 86 percent of them had worked at some job sometime during the year preceding the interview. There was almost no variation in this by drinking classification--even 88 percent of the alcoholic derelicts had worked at some time during the preceding year. The fact that at the time of the interview only about one half of the men were at work is explained by four factors: physical disability; chronic unemployment, with its seasonal fluctuations; age; and drinking status. Drinking status ranks below the other three as an explanation for not working. Most Skid Row men who are not at work are either elderly, disabled, or involuntarily unemployed.

It must be recognized, however, that the high unemployment rates among these men undoubtedly are due in part to the comparatively poor showing some of them make when they are employed. Because a significantly above-average percentage of men from Skid Row are heavy drinkers, are not in good physical health, and are said to be irregular and not dependable on the job, employers appear to have developed a stereotyped opinion that all men living in cubicle hotels or who give Skid Row addresses on their work applications, are irresponsible drunkards. High unemployment rates among nondrinking and not disabled homeless men who are willing to work may be due in part to this attitude among employers.

Usual versus present occupation. Information pertaining to occupation in the preceding chapters has all referred to present occupation, at time of interview. However, each man was also asked a series of questions concerning his work during the past year. By noting the types of jobs at which he worked most, a "usual occupation" was recorded for each. In most cases this was the job the man held longest during the past year. Table 9-3 presents this information on usual occupation. The differences in distribution between the present occupation and the usual occupation are not great, as may be determined from the following summary:

<u>Occupational type</u>	<u>Usual occupation</u>	<u>Present occupation</u>	<u>All jobs held last year</u>
Total . . . . .	100.0	100.0	100.0
White collar workers, all kinds. . .	9.2	14.1	13.0
Craftsmen, total . . . . .	7.2	7.0	9.5
Operatives, total. . . . .	13.7	11.1	20.0
manufacturing. . . . .	7.2	1.9	--
nonmanufacturing . . . . .	6.5	9.2	--
Services, total. . . . .	33.6	37.4	45.7
Restaurant cooks and waiters. .	6.3	5.1	--
Restaurant dishwashers, cleanup	12.4	12.0	--
Other services. . . . .	14.9	20.3	--
Laborers, farm . . . . .	--	--	3.6
Laborers, unskilled. . . . .	30.6	29.4	45.4
No information . . . . .	5.7	1.0	3.7

Table 9-3: Usual Occupation During Past Year of Men Who Worked During the Year: Chicago Skid Row, 1957. (Part 1 of 2)

Usual occupation during past year	Total	Drinking-age-disability classification of men under 65 years of age										
		Slightly and not handicapped						Moderate and severe handicap				Alcoholic dere- licts
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers	
All	20-44 years				45-64 years							
Total, who worked . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
WHITE COLLAR, TOTAL . . . . .	9.2	9.4	10.9	10.8	6.6	7.6	5.3	9.1	13.1	5.2	7.8	8.7
Professional, technical . . . . .	0.3	...	...	...	...	...	...	1.0	...	...	2.3	2.2
Manager, proprietor, official . . . . .	1.3	1.5	...	3.6	1.3	2.3	...	1.0	2.8	...	...	...
Messenger, office boy . . . . .	0.7	0.5	...	1.8	...	...	...	1.0	...	5.2	...	...
All other clerical . . . . .	5.6	5.9	8.2	3.6	5.3	5.3	5.3	5.1	7.5	...	5.3	6.5
Sales . . . . .	1.3	1.5	2.7	1.8	...	...	...	1.0	2.8	...	...	...
CRAFTS, TOTAL . . . . .	54.5	56.0	55.2	64.3	50.5	37.7	68.4	41.4	47.6	34.4	61.9	44.1
Craftsmen, mfg. . . . .	2.9	3.3	4.1	1.8	3.5	2.3	5.3	2.0	...	5.2	2.3	2.2
Craftsmen, nonmfg. . . . .	4.3	4.4	5.0	4.8	3.5	3.8	3.2	4.1	2.8	...	6.9	6.5
Operatives, in mfg. . . . .	7.2	8.3	10.5	7.7	6.6	6.8	6.3	5.1	8.4	...	4.6	...
Operatives, in nonmfg. . . . .	6.5	6.5	5.0	7.1	7.5	3.8	12.6	6.4	2.8	10.3	7.6	5.8
Restaurant--cooks, waiters, counter . . . . .	6.3	7.3	5.0	8.9	8.3	4.5	13.7	4.1	5.6	...	4.6	10.1
Restaurant--dishwashers, etc. . . . .	12.4	11.9	11.4	16.7	8.8	7.5	10.5	13.5	14.0	8.6	15.3	9.4
Service workers, other . . . . .	14.9	14.3	14.2	17.3	12.3	9.0	16.8	6.2	14.0	10.3	20.6	10.1

Table 9-3: Usual Occupation During Past Year of Men Who Worked During the Year: Chicago Skid Row, 1957. (Part 2 of 2)

Usual occupation during past year	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic derelicts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers	
					All	20-44 years	45-64 years					
Total, who worked . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
LABORERS (by industry),												
TOTAL . . . . .	30.6	34.8	33.9	25.1	43.0	55.0	26.4	39.6	39.3	60.4	30.5	47.1
Construction & agriculture	4.8	6.0	6.4	3.0	7.9	9.8	5.3	2.4	1.9	5.2	1.5	...
Factory & mining . . . . .	3.3	3.1	5.0	1.8	2.2	3.8	...	3.7	2.8	8.6	2.3	2.2
Transportation . . . . .	16.7	15.8	14.2	7.1	23.7	30.8	13.7	18.6	10.3	25.9	22.1	36.2
Wholesale & retail . . . . .	4.1	4.2	3.7	5.4	3.9	4.5	3.2	3.7	5.6	5.2	1.5	3.6
Other . . . . .	1.7	5.7	4.6	7.8	5.3	6.1	4.2	11.2	18.7	32.6	3.1	17.2
Business service . . . . .	...	...	...	...	...	...	...	...	...	...	...	...
Personal service . . . . .	0.2	...	...	...	...	...	...	0.7	1.9	...	...	...
Entertainment . . . . .	1.0	1.0	...	1.8	1.3	2.3	...	1.0	2.8	...	...	...
Religion, welfare, public admin. . . . .	0.5	0.8	...	...	2.2	2.3	2.1	...	...	...	...	2.2
No information . . . . .	5.7	3.9	4.6	6.0	1.8	1.5	2.1	9.5	14.0	15.5	3.1	2.9
Did not work in past year .	13.5	4.2	7.6	5.1	...	...	...	28.0	40.2	17.1	19.1	12.1

A few more jobs as white collar workers (messengers) and as operatives in factories appear to be available on a year-round basis than in the wintertime (current occupation); but, except for this, the occupational composition at the time of the interviewing is very similar to the usual occupation.

Usual industry of employment. The usual industry in which man is employed was determined by a procedure similar to that followed for obtaining usual occupation. A comparison between year-round average (usual industry) and wintertime employment (present industry during week preceding the interview) may be made as follows:

<u>Industry</u>	<u>Usual industry in past year</u>	<u>Current industry (week preceding interview)</u>
Total. . . . .	100.0	100.0
Agriculture . . . . .	3.2	1.3
Construction . . . . .	5.7	2.9
Manufacturing . . . . .	15.7	11.5
Transportation, railroad . . . . .	16.4	}10.6
Transportation, other . . . . .	3.6	
Wholesale and retail, except restaurant	6.8	15.5
Restaurants--eating and drinking places	20.4	20.3
Business services . . . . .	4.4	10.5
Personal services . . . . .	6.5	}19.4
Entertainment . . . . .	5.9	
Religious, welfare . . . . .	5.0	8.0
Industry not reported . . . . .	6.4	...

During the warm-weather months, employed Skid Row laborers work in agriculture, construction, and manufacturing to a much greater extent than during the winter months. By far the greatest seasonal shifts are between railroad work and other types of work. On a year-round basis, one man on Skid Row in six who works has railroad work (gandy dancer) as his major source of livelihood. During the winter months, when railroad work is not available, employment is sought in a variety of service industries and in missions.

A very striking relationship exists between being a railroad worker and being a heavy drinker. From table 9-4 it may be noted that more than one fourth of all heavy drinkers on Skid Row who worked in the previous year reported railroad work as the usual industry of employment. And 38 percent of the alcoholic derelicts who had worked claimed gandy work as their usual occupation. (In contrast, only 12 percent of the men who were teetotalers or light drinkers were railroad workers.) Two interpretations may be placed upon this very important finding. (a) The railroad is a major benefactor of chronic alcoholics. It employs them when no one else will and thereby permits many to be self-supporting. It takes them off Skid Row for prolonged periods of time, dries them out, gives them a balanced diet and exercise which temporarily breaks the cycle of incessant drinking. (b) The railroad maintenance gang is one of the last outposts of the work-drinking culture, where the conditions of work, and the living arrangements create tensions and make normal family life impossible to such an extent that the drinking culture thrives as a substitute. By the first view, the railway maintenance gang serves a laudible welfare service. By the second view, the all-male railway maintenance gang perpetuates a social situation that once was widely characteristic of frontier America in mining, logging, cattle



Table 9-4: Usual Industry of Employment During Past Year of Men Who Worked During the Year: Chicago Skid Row, 1957.

Usual industry in past year	Total	Drinking-age-disability classification of men under 65 years of age										Alco- holic dere- licts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers	
All	20-44 years				45-64 years							
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Agriculture . . . . .	3.2	3.4	3.7	...	5.7	7.5	3.2	2.7	...	10.3	1.5	...
Construction . . . . .	5.7	7.2	9.1	7.7	4.8	4.5	5.3	2.7	1.9	...	4.6	4.3
Manufacturing, mining . . . .	15.7	16.7	21.0	16.1	13.2	12.8	13.7	13.5	16.8	13.8	10.7	5.8
Transportation, except railroad . . . . .	3.6	3.4	4.1	3.6	2.6	2.3	3.2	4.1	1.9	...	7.6	2.2
Transportation, railroad . . .	16.4	15.4	11.9	5.4	26.3	33.1	16.8	18.2	11.2	25.9	20.6	38.4
Wholesale and retail, except eating and drinking places . . . . .	6.8	7.3	7.3	10.7	4.8	3.8	6.3	5.7	8.4	10.3	1.5	2.9
Wholesale and retail, eat- ing and drinking places . . . .	20.4	21.8	16.9	29.2	21.1	18.8	24.2	17.6	16.8	8.6	22.1	21.7
Business service . . . . .	4.4	3.9	5.5	5.4	1.3	2.3	...	5.4	7.5	5.2	3.8	2.2
Personal service . . . . .	6.5	5.0	6.4	5.4	3.5	3.8	3.2	9.5	13.1	5.2	8.4	3.6
Entertainment . . . . .	5.9	6.8	6.4	8.9	5.7	6.0	5.3	4.1	5.6	...	4.6	2.2
Religion, welfare, public administration . . . . .	5.0	4.6	3.2	...	9.2	3.8	16.8	6.1	2.8	5.2	9.2	11.6
Industry not reported . . . .	6.4	4.4	4.6	7.7	1.8	1.5	2.1	10.5	14.0	15.5	5.3	5.1

herding, and many other occupations where males worked in groups in prolonged isolation from average community contacts, and which developed and perpetuated a tradition of heavy drinking. Later chapters, which analyze explicitly the roots of alcoholism in the lives of Skid Row men, will try to furnish information with which to examine the validity of each of these interpretations of the role which railroad work plays in alcoholism.

Types of jobs held last year. During the course of a year, the Skid Row men hold a great variety of jobs. In the preparation of table 9-5, all of the steady jobs (jobs that were not just "spot jobs") have been classified by major type, and the percentages of men holding each type of job is shown. (This is why the columns add to more than 100 percent.) From this table it appears that a considerable share of the Skid Row men have contact with "better jobs" which they do not or cannot keep. For example, almost 10 percent of the men had jobs as craftsmen, an additional 10 percent worked as clerical workers, and 20 percent were operatives. These are much larger proportions than were reported for usual occupation. (See the summary comparison of present occupation, usual occupation, and all occupations for the past year, in the section on occupation by drinking-disability-age, above.) Among men who had arrived at Skid Row during the past year, some of these better jobs may have been held before the man "slid down" to Skid Row.

On the other hand, almost all of the men had contact with lower-paying jobs during the year. Nearly one half of them had worked as laborers and one half as service workers. Thus, many who might earn high wages as gandies during the summer may be reduced to washing dishes or scavenging for bottles during the winter. An unusually high percentage of heavy drinkers, especially those aged 20-44 years, were inclined to have worked as laborers.

It may be noted with some interest that Chicago's Skid Row is not a winter stopping-over place for large numbers of agricultural workers, for only 4 percent of the men interviewed reported that they had been farm laborers at any time during the preceding year.

Hours worked by drinking-disability-age classification. It already has been shown in an earlier chapter that only about one half of Skid Row workingmen are employed at full-time jobs. However, table 9-6 shows that part-time work is especially prevalent among those who are disabled and those who are heavy drinkers. For example, 35 percent of the not-handicapped men aged 45-64 who were heavy drinkers worked less than 15 hours during the week preceding the interview. (Many of these were railroad workers spending the winter living on their "rocking chair" pay.) Only 14 percent of the not-handicapped teetotalers or light drinkers worked so few hours.

Surprisingly, however, the men who worked the most hours during the week preceding the interview were also inclined to be heavy drinkers. A recheck of the interviews showed that this did not appear to be an exaggeration. Instead, among unskilled workers and workers in service occupations (such as restaurant dishwashers) where long hours are required, heavy drinking is a leading pastime. This finding could be stated in another way: many industries that consent to hire chronic alcoholics make them work long hours, often at very low pay.

Drinking, disability, and age do not explain all of the part-time work, however. Table 9-6 reports that even among not-handicapped men who were teetotalers or only light drinkers, 48 percent worked less than 35 hours during the week preceding the interview. The reason, of course, is slack employment during the winter months, when the number of job applicants is far greater than the number of jobs available.

Table 9-5: Types of Jobs Held Last Year by Men Who Had Worked During the Year: Chicago's Skid Row, 1957.

Occupational classification of all jobs held	Total	Drinking-age-disability classification of men under 65 years of age										
		Slightly and not handicapped						Moderate and severe handicap				Alco- holic dere- licts
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers	
All	20-44 years				45-64 years							
Total* . . . . .	...	...	...	...	...	...	...	...	...	...	...	...
Professional, technical . .	0.3	...	...	...	...	...	...	1.0	...	...	2.3	2.2
Farmers, farm managers . .	...	...	...	...	...	...	...	...	...	...	...	...
Managers, officials, pro- prietors . . . . .	1.6	1.5	...	3.6	1.3	2.3	...	2.0	5.6	...	...	...
Clerical and kindred workers . . . . .	9.7	10.6	11.0	12.5	8.8	9.0	8.4	7.8	10.3	8.6	5.3	6.5
Sales workers . . . . .	1.4	2.1	2.7	1.8	1.8	1.5	2.1	...	...	...	...	...
Craftsmen, foremen, kindred workers . . . . .	9.5	10.6	13.2	8.3	9.6	8.3	11.6	7.4	2.8	8.6	10.7	10.9
Operatives, and kindred workers . . . . .	20.0	21.8	20.5	20.2	24.1	22.6	26.3	16.2	14.0	20.7	16.0	13.0
Service workers . . . . .	45.7	45.0	42.5	51.2	43.0	38.3	49.5	47.0	43.9	44.8	50.4	40.6
Farm laborers . . . . .	3.6	3.6	1.8	3.6	5.3	6.8	3.2	3.7	5.6	5.2	1.5	...
Laborers, except farm . . .	45.4	47.2	44.3	33.9	59.6	72.9	41.1	41.9	39.3	53.4	38.9	59.4
Occupation not reported . .	3.7	2.4	2.3	6.0	...	...	...	6.4	8.4	10.3	3.1	1.4

\*Note: Percentages add to more than 100 percent because many men held more than one job.

Table 9-6: Hours Worked and Wages per Hour for Week Preceding interview by Employed Men Under 65 Years of Age: Chicago's Skid Row, 1957.

Item	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic derelicts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers	
All	20-44 years				45-64 years							
<b>HOURS WORKED</b>												
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
1-14 hours . . . . .	22.8	21.5	13.7	24.4	29.3	24.7	35.2	26.8	18.8	14.3	42.4	35.7
15-34 hours . . . . .	24.3	24.6	35.1	14.6	18.9	24.7	11.3	23.5	37.5	19.0	15.3	16.1
35-40 hours . . . . .	29.3	28.0	33.2	23.6	25.0	23.7	26.8	33.6	25.0	54.8	20.3	14.3
41-47 hours . . . . .	8.0	10.0	10.7	13.8	6.1	8.6	2.8	1.3	...	4.8	...	8.9
48 or more hours . . . . .	15.6	15.9	7.3	23.6	20.7	18.3	23.9	14.8	18.8	7.1	22.0	25.0
<b>WAGES PER HOUR</b>												
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Less than \$.35 . . . . .	4.2	3.0	1.5	4.9	3.7	6.5	...	8.1	4.2	11.9	8.5	...
\$.40 to \$.65 . . . . .	13.4	12.2	10.7	12.2	14.0	12.9	15.5	17.4	22.9	14.3	15.3	17.9
\$.70 to \$.95 . . . . .	18.3	16.5	15.1	13.8	20.1	19.4	21.1	24.2	18.8	23.8	28.8	25.0
\$1.00 . . . . .	22.6	25.0	26.3	26.0	22.6	31.2	11.3	14.8	16.7	14.3	13.6	19.6
\$1.05 to \$1.30 . . . . .	11.5	13.8	13.2	13.8	14.6	10.8	19.7	4.0	6.3	...	5.1	10.7
\$1.35 to \$1.70 . . . . .	8.9	8.5	5.9	9.8	11.0	9.7	12.7	10.1	12.5	7.1	10.2	5.4
\$1.75 to \$2.20 . . . . .	13.7	13.0	17.1	12.2	8.5	9.7	7.0	16.1	18.8	21.4	10.2	10.7
\$2.25 and over . . . . .	5.6	6.7	8.8	4.9	5.5	...	12.7	2.0	...	...	5.1	10.7
Wages not reported . . . . .	1.7	1.2	1.5	2.4	0.0	...	...	3.4	...	7.1	3.4	...

Wages and drinking-disability-age classification. Who on Skid Row receives the extraordinarily low wages reported in Chapter 3 and who receives the more adequate rates of pay? Table 9-6 shows that, in comparison with other workingmen, a higher percentage of physically disabled or heavy drinking workingmen receive lower wages. However, low rates of pay are not confined to these two disadvantaged groups. Even among workers who are not handicapped and who are teetotalers or only light drinkers, 12.2 percent, or one man in eight, received 65 cents an hour or less, and 27 percent were receiving less than the minimum wage of \$1.00 per hour. The disabled workingman who does not drink is especially subject to low pay; 45 percent of such men received less than \$1.00 per hour for their work. Among the comparatively small group of men who were earning \$1.75 per hour or more, a disproportionately large share were teetotalers or only light drinkers. Yet, as table 9-6 reports, many handicapped men and many men who are heavy drinkers do receive wages of \$1.75 per hour or more. In fact, among the 26 percent of alcoholic derelicts who had worked during the week preceding the interview, one fifth (roughly 5 percent of all derelicts) claimed wages of \$1.75 per hour or more.

Wages earned last week by workingmen by drinking-disability-age classification. If earning \$25.00 per week is accepted as the minimum amount a workingman must get in order to support himself with minimum adequacy, then more than 40 percent of the workingmen on Skid Row earn less than such a minimum. As would be suspected from the preceding section on earnings, it is the disabled and the heavy drinker who has the smallest earnings, and the lowest rate of earning is reported by the man who is both handicapped and alcoholic. More than 60 percent of the heavy drinkers who worked and who were moderately or severely handicapped earned less than \$25.00 during the week preceding the interview. But even one third of the not-handicapped workers who were teetotalers or light drinkers earned less than the minimum for adequate self-maintenance. Therefore, poverty due to inadequate earning power is very widespread on Skid Row, even among the workingmen who are not disabled and who are not heavy drinkers.

Income earned last year by workingmen, by drinking-disability-age classification. The picture painted above, on the basis of weekly income during the winter season, is also generally valid on an annual basis. Continuing on the supposition that \$25.00 per week (\$1,300 per year) is the minimum income consistent with decent and healthful living for a familyless man, then about 40 percent of the workingmen on Skid Row fail to earn enough during the course of a year to support themselves at this minimum level, and about one seventh of them do not even achieve one half of this minimum. This inadequacy of income is greatest among the handicapped and among the heavy drinkers. Even the workingman who is not handicapped and is a teetotaler or light drinker earns a minimum adequate livelihood in only 70 percent of the cases. From the preceding discussion, it is evident that the 30 percent of able-bodied nonalcoholics who earn inadequate incomes are subject to large amounts of involuntary unemployment, although a small minority of them may have inadequate earnings because of indolence.

Sources of income of all Skid Row men by drinking-disability-age classification. The preceding discussion of the income of workingmen on Skid Row provides a convenient opportunity to digress long enough to report the sources of income of all Skid Row men, by their drinking-age-disability classification (table 9-9). Only about one half of all men who live on Skid Row support themselves entirely from wages or salary; the other one half either live entirely on pensions of some type (10 percent) or else on some combination of wages and pension. Of the 40 percent who combine wages and pensions to earn a livelihood, by far the greatest proportion shuttle between unemployment insurance and employment, with employment furnishing one half or more of the income in a majority of cases. Each year, about 15 percent of the men

Table 9-7: Total Wages Earned During Week Preceding Interview by Employed Men Under 65 Years of Age: Chicago's Skid Row, 1957.

Wages earned last week	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic dere- licts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers	
					All	20-44 years	45-64 years					
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
\$0-9 . . . . .	16.7	15.9	10.7	20.3	18.9	15.1	23.9	19.5	12.5	21.4	23.7	21.4
\$10-19 . . . . .	17.3	15.0	17.1	11.4	15.2	16.1	14.1	24.8	25.0	16.7	30.5	19.6
\$20-29 . . . . .	15.6	16.1	16.6	15.4	15.9	20.4	9.9	14.1	18.8	7.1	15.3	8.9
\$30-39 . . . . .	9.5	9.6	12.7	12.2	3.7	6.5	...	9.4	6.2	11.9	10.2	5.4
\$40-49 . . . . .	13.4	14.4	17.1	8.9	15.2	17.2	12.7	10.1	12.5	7.1	10.2	14.3
\$50-69 . . . . .	14.2	14.2	7.3	17.1	20.7	15.1	28.2	14.1	18.8	21.4	5.1	25.0
\$70 and over . . . . .	11.9	13.6	17.1	12.2	10.4	9.7	11.3	6.0	6.2	7.1	5.1	5.4
Not reported . . . . .	1.4	1.2	1.5	2.4	...	...	...	2.0	...	7.1	...	...

Table 9-8: Income Last Year of Homeless Men, by Drinking-disability-age Classification: Chicago's Skid Row, 1957.

Income	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic dere- licts	
		Slightly and not handicapped						Moderate and severe handicap					
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers		
All	20-44 years				45-64 years								
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Less than \$750 . . . . .	16.4	11.6	16.9	7.5	10.0	6.7	14.7	24.1	26.4	19.8	24.0	19.6	
\$750 to \$1500 . . . . .	29.4	24.0	26.2	29.6	17.9	17.4	18.7	37.9	42.7	30.3	37.2	29.3	
\$1500 to \$2500 . . . . .	24.0	27.6	19.1	25.2	36.9	39.3	33.3	18.3	21.3	21.0	14.3	20.7	
\$2500 and over . . . . .	25.7	33.2	32.5	32.8	34.2	36.6	30.3	14.0	5.7	18.6	19.4	27.7	
Income not reported . . . . .	4.4	3.6	5.3	4.8	1.2	...	2.9	5.7	3.8	10.5	5.1	2.7	

Table 9-9: Sources of Income: Percent of Men Who Received Specified Proportions of Their Income from Wages, Pensions, and Gifts: Chicago's Skid Row, 1957.

Percent income and source	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic derelicts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Tee-totalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Tee-totalers & light drinkers	Moderate drinkers	Heavy drinkers	
					All	20-44 years	45-64 years					
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
DERIVED FROM WAGES												
Zero . . . . .	11.4	3.0	5.3	3.2	0.8	1.3	...	24.5	41.5	7.0	17.7	11.7
1-19 . . . . .	4.3	2.8	2.6	4.8	1.2	...	2.9	6.9	3.8	14.0	6.3	5.9
20-59 . . . . .	4.1	2.8	2.6	...	4.8	4.6	4.9	6.4	5.7	10.5	5.1	2.7
60-79 . . . . .	6.8	6.4	4.0	4.3	10.0	10.7	8.8	7.6	5.7	3.5	11.4	13.9
80-99 . . . . .	18.4	19.5	15.5	17.2	24.6	30.0	16.7	16.7	12.6	17.5	20.0	25.5
100% . . . . .	52.6	64.0	68.4	65.6	58.7	53.3	66.7	34.8	30.8	37.2	37.1	39.4
DERIVED FROM PENSIONS												
Zero . . . . .	61.5	72.1	76.0	67.2	72.2	69.3	76.5	44.8	42.8	47.7	45.1	51.1
1-19 . . . . .	11.3	12.6	6.7	15.6	15.9	22.6	5.9	9.3	5.7	7.0	13.7	16.5
20-79 . . . . .	9.7	8.1	7.9	4.3	10.8	7.9	14.6	12.5	10.1	14.0	14.3	14.9
80-99 . . . . .	5.2	3.0	2.7	4.8	1.2	...	2.9	9.3	7.6	14.0	8.5	6.4
100% . . . . .	9.8	2.7	5.3	3.2	...	...	...	21.0	34.0	7.0	16.0	10.1
DERIVED FROM GIFTS												
Zero % . . . . .	85.5	87.9	91.1	90.3	83.3	80.7	87.3	81.7	84.9	72.1	83.4	81.4
Less than 10% . . . . .	6.5	6.0	6.2	4.8	6.7	6.0	7.8	7.1	6.3	10.5	6.3	4.8
10% and over . . . . .	5.7	4.3	1.3	...	9.9	13.2	4.9	8.1	8.9	7.0	7.9	12.8
NOT REPORTED . . . . .	2.3	1.8	1.3	4.8	...	...	...	3.1	...	10.5	2.3	1.1



receive gifts of some sort from inheritances, from begging, or from other sources, but this provides as much as 10 percent of the total income for only about 6 percent of the men.

Men who are physically handicapped earn a much greater share of their livelihood from pensions and gifts, and less from wages than do men who are not handicapped. Also, men who are heavy drinkers (especially younger men who are heavy drinkers) tend to rely upon small pension payments (unemployment compensation) and upon gifts for a larger part of their income than do men who are not heavy drinkers.

The alcoholic derelicts (extreme right column of table 9-9) depend solely upon wages in only about 40 percent of the cases; 60 percent rely upon pensions or gifts at least in part: 10 percent obtain their full livelihood from pensions, and the other 50 percent rely upon a combination of gifts, pension, and wages. About 12 percent of them received no wages at all during the past year.

This information concerning sources of income reported in table 9-9 demonstrates, in yet another way, just how much the entire economy of Skid Row depends upon transfer payments of public funds for unemployment, public welfare, old-age, Social Security, or other pensions.

Number of jobs held last year, by drinking-age-disability classification. The average Skid Row man who works holds two or more jobs during the course of a year. Only about 40 percent of the workmen had held only one job, and 16 percent had not had a steady job at all, but only spot jobs. In making these calculations, a job was counted only if it was a potential "regular" job, and not a "spot job." A higher proportion of men who were disabled and heavy drinkers had held two or more jobs than men who were not disabled or not heavy drinkers. Young men who were heavy drinkers had by far the greatest number of job changes; 12 percent of such men had 5 or more "steady" jobs during the past year.

Table 9-10 shows that contrary to what may be general opinion, the persons who worked only at "spot jobs" during the year preceding the interview (had held no regular jobs) were not preponderantly heavy drinkers, but instead were handicapped teetotalers and light drinkers or moderate drinkers. Fully one third of all handicapped persons who were teetotalers or light drinkers had worked only as spot job workers. Thus, the "spot job" worker is less likely to be a chronic alcoholic than to be a disabled person.

Weeks worked per job, by drinking-disability-age classification. How long can a Skid Row workman hold a regular job? Table 9-11 answers this question for each of several drinking-disability-age classifications. Only 13 percent of all men who worked during the year had held one job throughout that time. At the other extreme, about 30 percent either changed jobs every day or so (worked only at spot jobs) or else changed regular jobs every two months or oftener. An additional large share of men who worked (roughly one third) changed regular jobs every 2 to 6 months, giving them a total of 2 to 6 job changes for the year. The ability to hold a job for a long period of time is closely related to not being handicapped and not being a heavy drinker. The men who had the most frequent job changes (worked the shortest time per job) were heavy drinkers (especially young, not disabled, heavy drinkers) and handicapped teetotalers and moderate drinkers.

Like or dislike for jobs. Each man who had worked in recent months was asked the questions, "How well do you like the work you have been doing recently, do you like or dislike it? What do you like about it? What do you dislike?" Roughly one half

Table 9-10: Number of Jobs Held Last Year by Men Who Worked, Chicago's Skid Row, 1957.

Number of jobs held last year	Total	Drinking-age-disability classification of men under 65 years of age										
		Slightly and not handicapped						Moderate and severe handicap				Alcoholic derelicts
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers	
					All	20-44 years	45-64 years					
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
1 job . . . . .	38.5	41.5	47.0	40.5	36.8	30.8	45.3	32.4	36.4	20.7	34.4	39.9
2 jobs . . . . .	23.5	24.2	21.9	25.6	25.4	24.8	26.3	22.0	14.0	29.3	25.2	24.6
3 jobs . . . . .	10.4	10.7	12.3	8.9	10.5	12.8	7.4	9.8	8.4	5.2	13.0	8.0
4 jobs . . . . .	5.9	6.0	3.2	6.5	8.3	10.5	5.3	5.7	1.9	8.6	7.6	5.8
5 jobs or more . . . . .	3.1	4.1	1.4	...	9.6	12.1	6.4	1.0	2.8	...	...	6.5
No steady jobs, only spot jobs . . . . .	16.0	11.4	13.2	13.7	7.9	6.8	9.5	25.7	33.6	31.0	16.8	11.6
No information . . . . .	2.5	2.1	0.9	4.8	1.3	2.3	...	3.4	2.8	5.2	3.1	3.6

Table 9-11: Average Weeks Per Job During Year Preceding Interview of Men Who Worked at Regular Full-time Jobs: Chicago's Skid Row, 1957.

Average weeks per job	Total	Drinking-age-disability classification of men under 65 years of age										Alcoholic derelicts
		Slightly and not handicapped						Moderate and severe handicap				
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers	
					All	20-44 years	45-64 years					
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
0-3 weeks . . . . .	6.5	5.7	3.2	8.3	6.2	4.0	9.5	8.5	4.2	15.0	8.9	6.4
4-7 weeks . . . . .	9.9	9.4	5.8	4.1	16.3	18.5	13.1	11.2	14.1	10.0	9.8	12.8
8-11 weeks . . . . .	12.4	9.6	6.8	11.0	11.1	12.9	8.3	19.3	22.5	30.0	13.4	16.8
12-15 weeks . . . . .	11.7	14.0	10.5	18.6	13.9	16.1	10.7	6.3	4.2	7.5	7.1	8.8
16-19 weeks . . . . .	10.6	12.3	7.4	13.8	15.9	22.6	6.0	6.3	8.5	...	7.1	12.8
20-23 weeks . . . . .	7.3	7.2	8.4	2.1	9.6	4.8	16.7	7.6	4.2	7.5	9.8	10.4
24-27 weeks . . . . .	9.3	7.7	13.2	4.1	5.3	2.4	9.5	13.0	8.5	7.5	17.9	12.0
28-39 weeks . . . . .	5.5	5.5	7.5	9.6	1.0	...	2.4	5.8	4.2	...	9.0	...
40-47 weeks . . . . .	5.9	7.8	9.5	8.3	5.8	4.8	7.1	1.3	4.2	...	...	2.4
48 and over . . . . .	13.4	15.1	24.7	12.4	8.2	7.3	9.5	9.4	16.9	15.0	2.7	...
No information . . . . .	7.3	5.7	3.2	7.6	6.7	6.5	7.1	11.2	8.5	7.5	14.3	17.6
Spot jobs only . . . . .	15.9	11.7	13.2	13.7	8.8	6.8	11.6	24.7	33.6	31.0	14.5	9.4
Not worked . . . . .	13.5	4.2	7.6	5.1	...	...	...	28.0	40.2	17.1	19.1	12.1

(52 percent) of the men stated that they liked their work, about one fourth openly stated that they disliked it, while the other one fourth were ambivalent (see table 9-12). The greatest degree of overt dissatisfaction came from men who were heavy drinkers. Among men who were teetotalers or light drinkers, the proportion dissatisfied was less than 40 percent as great as among heavy drinkers. This was true both for handicapped and not handicapped workers.

When asked what it was about their jobs that they liked most, the men who expressed an opinion gave the reasons summarized in table 9-13. More than 40 percent of those who had worked did not mention liking any particular thing. Among the men who did mention something about their job that they liked, one third stated that their job was suited to them, or that they got satisfaction out of doing their job. Good or comfortable working conditions were mentioned by 15 percent. Although 10 percent reported that they liked the financial aspects (the rate of pay), this was heavily concentrated among the teetotaler or light drinker groups that held, as shown above, the steadier and better paying jobs. Only 3 percent mentioned liking their employer and only 5 percent felt that their job offered enough security to mention it as an asset.

When asked what they disliked (table 9-14), the leading items mentioned were: dislike of the nature of the work, low pay, insecurity, and poor working conditions. However, of the men who had worked recently, on half failed to mention disliking any particular thing about their job. Only 1 percent reported a dislike for the employer. Heavy drinkers, especially those not handicapped, did not like the kind of work they had been doing, and believed that the pay was too low.

The information concerning job satisfaction might be summarized by stating that although there is a moderately high level of job dissatisfaction among homeless men, it is much lower than might be expected in view of the low wages, high unemployment, and other conditions described earlier in this chapter. Their aspirations for better work are quite modest.

Spot jobs versus steady jobs. The spot job plays such an important part in the life of the Skid Row men that an effort was made to learn how well they liked this kind of employment. The question was asked, "Would you rather have 'spot jobs' or a steady job?" Men who reported that they preferred spot jobs were asked why they made this choice. Men who preferred steady jobs were asked, "Do you think you could handle a steady job working five days a week, eight hours a day?" Those who wanted a steady job but thought they would not be able to handle it were asked what would keep them from being able to work full time. Table 9-15 summarizes the results of this line of inquiry. Despite the fact that spot jobs comprised more than 45 percent of the total employment during the week preceding the interview, only 7 percent of the men preferred working at spot jobs to having a steady job. Often it is said that heavy drinkers really would prefer to work at spot jobs because they have complete freedom to choose the days to work and the days to drink. Actually, heavy drinkers showed the same lack of enthusiasm for spot jobs that teetotalers and light drinkers did. In fact, as a group the teetotalers showed the greatest preference for spot jobs because many of them felt too old or sick to try to hold a steady job.

Although there was overwhelming preference for steady work, a substantial share of the men stated they did not think they could handle a steady job. Many of the light drinkers and teetotalers reported they were too old or sick, while many of the heavy drinkers admitted that problem drinking would prevent them from working steady. About 10 percent of the heavy drinkers confessed either that they did not want a steady job or that they did not think they could hold a steady job if they had it.

However, 60 percent of the men who were available for work definitely preferred steady employment and claimed to believe they could hold such a job if it were offered to them.

Table 9-12: Like or Dislike for Recent Work Expressed by Skid Row Men, Chicago: 1957.

Like or dislike for recent work, of those reporting	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drinkers			Total	Tee- total- ers & light drink- ers	Mode- rate drink- ers	Heavy drink- ers
					All	20-44 years	45-64 years				
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Dislikes recent work . . . .	24.0	24.7	13.9	23.3	34.2	35.5	32.3	22.4	5.6	23.1	31.7
Neither likes nor dislikes	12.9	11.3	11.8	14.7	8.5	10.6	5.4	16.6	11.3	18.5	18.7
Do not dislike, but prefers another . . . . .	10.1	12.0	12.8	13.5	10.3	5.7	17.2	5.8	4.2	4.6	7.3
Likes recent work . . . . .	51.6	50.5	61.5	46.6	44.4	44.0	45.2	54.1	78.9	49.2	42.3
No information re: like or dislike . . . . .	1.4	1.5	...	1.8	2.6	4.3	...	1.2	...	4.6	...
No recent work or retired . .	17.4	6.8	9.8	6.0	4.9	4.1	6.1	34.1	54.5	18.1	23.1
No information on recent work . . . . .	2.4	2.3	2.8	4.9	...	...	...	2.5	...	3.6	4.1

Table 9-13: Things Liked About Recent Work: Homeless Men on Chicago's Skid Row: 1957.

Things liked about recent work (among men who have worked recently)	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Tee-total-ers & light drink-ers	Mode-rate drink-ers	Heavy drinkers			Total	Tee-total-ers & light drink-ers	Mode-rate drink-ers	Heavy drink-ers
					All	20-44 years	45-64 years				
Percent of men mentioning	...	...	...	...	...	...	...	...	...	...	...
Financial (good pay) . . . . .	9.7	9.8	16.6	1.8	9.8	7.8	12.9	9.7	21.1	4.6	5.7
Security . . . . .	5.2	6.5	4.3	6.7	8.1	9.9	5.4	2.3	4.2	4.6	...
Job suitability, satisfaction . . . . .	30.5	28.6	24.6	36.8	26.1	27.0	24.7	34.7	35.2	38.5	32.5
Employer . . . . .	3.1	3.9	6.4	1.8	3.4	3.5	3.2	1.2	4.2	...	...
Fellow employees . . . . .	7.1	8.9	8.0	8.6	9.8	10.6	8.6	3.1	4.2	3.1	2.4
Comfort, working conditions	15.1	14.6	16.0	11.0	15.8	17.7	12.9	16.2	16.9	...	24.4
Hours of work . . . . .	1.4	2.1	3.2	1.8	1.3	2.1	...	...	...	...	...
Independence . . . . .	6.9	8.0	10.7	6.7	6.8	5.0	9.7	4.2	7.0	...	4.9
Working, but no likes mentioned . . . . .	43.5	43.2	41.7	42.9	44.4	42.6	47.3	44.4	36.6	49.2	46.3

Table 9-14: Things Disliked About Recent Work: Homeless Men on Chicago's Skid Row: 1957

Things disliked about recent work among men who had worked recently	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers
All	20-44 years				45-64 years						
Financial (low pay) . . . . .	16.7	19.2	19.3	16.0	21.4	27.0	12.9	11.2	11.3	16.9	8.1
Lack of security . . . . .	10.3	11.3	12.8	5.5	14.1	14.9	12.9	8.1	9.9	12.3	4.9
Job not suitable, dislike that kind of work . . . . .	18.7	18.5	8.0	23.9	23.1	17.0	32.3	19.3	11.3	13.8	26.8
Dislike employer . . . . .	1.3	1.4	3.2	...	0.9	1.4	...	1.2	...	4.6	...
Dislike fellow employees . . . . .	2.6	3.4	4.8	3.1	2.6	2.1	3.2	0.8	...	...	1.6
Uncomfortable, poor working conditions . . . . .	6.4	8.0	11.2	7.4	6.0	3.5	9.7	2.7	2.8	4.6	1.6
Dislike hours of work . . . . .	3.7	3.8	3.2	1.8	5.6	3.5	8.6	3.5	...	...	7.3
Lack of independence . . . . .	1.7	1.2	...	2.5	1.3	2.1	...	2.7	9.9	...	...
Working, no dislikes mentioned . . . . .	51.0	46.9	50.8	52.1	40.2	41.1	38.7	60.2	64.8	56.9	59.3

Table 9-15: Preference of Skid Row Men for Spot Jobs or Steady Jobs, and Reasons for Preference:  
Chicago's Skid Row: 1957

Preference for spot or steady work of men under 65, and working over 65	Total	Drinking-age-disability classification of men under 65 years of age							
		Slightly and not handicapped				Moderate and severe handicap			
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers	Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Prefer spot job . . . . .	6.4	4.6	4.3	3.3	5.7	9.4	10.6	7.8	9.2
Too old or sick . . . . .	1.8	1.4	...	3.3	1.2	2.4	4.5	...	1.8
Do not need steady job . . . . .	0.3	...	...	...	...	0.8	...	3.9	...
Confession of unsteadiness at holding job . . . . .	2.2	2.2	2.9	...	3.3	2.1	3.8	...	1.8
Problem of drinking . . . . .	1.2	0.5	...	...	1.2	2.4	...	...	5.5
No reason given . . . . .	0.9	0.5	1.4	...	...	1.6	2.3	3.9	...
Prefer steady job . . . . .	90.1	93.1	94.2	91.7	93.1	84.9	84.8	84.4	85.3
Could handle steady job . . . . .	61.0	62.5	59.6	61.7	65.4	58.6	55.3	59.7	60.7
Could not handle steady job, total . . . . .	6.2	0.9	...	...	2.4	15.1	20.5	3.9	15.9
Too old or sick . . . . .	4.4	...	...	...	...	11.8	20.5	3.9	8.6
Do not need steady job . . . . .	...	...	...	...	...	...	...	...	...
Confession of unsteadiness at holding job . . . . .	...	...	...	...	...	...	...	...	...
Problem of drinking . . . . .	1.8	0.9	...	...	2.4	3.2	...	...	7.4
No information on whether could handle . . . . .	22.9	29.7	34.6	30.0	25.2	11.3	9.1	20.8	8.6
No information on preference . . . . .	3.6	2.4	1.4	5.0	1.2	5.6	4.5	7.0	5.5



Interest in vocational training. The suggestion has been made that one way to improve the lot of these men would be to offer them some kind of training that would allow them to rise out of the ranks of unskilled laborers and to acquire better and more satisfying work. In order to find out whether the men had any interest in such a program they were asked, "If you could get free training to prepare you for a better job, would you be interested in taking it?" Those who answered "No" were asked "Why?" and those who answered "Yes" were asked what kind of training they would like to get. Table 9-16 reports the results of these inquiries.

Three fourths of the men said they would be interested in obtaining free training, while only one fourth reported no interest. The reason given most often for not being interested was that they were too old or sick. This answer was especially frequent among the men who were physically handicapped. Most of the remainder of the group not interested reported that they were satisfied with their present job. Only about 2 percent said they were not interested because they could not or would not want to learn.

Of course, this was only an hypothetical question, and does not necessarily bear any relationship to what the men would actually do if given the opportunity to get free training. However, verbally at least, there is a widespread desire for vocational retraining on Skid Row. Inclusion of a program of vocational training should be considered in planning for the rehabilitation of these men.

When asked what kind of training they would like to get, almost one half wanted to learn a craft. Also, a substantial share wanted to learn to be operatives in factories. Following is a listing of the specific occupations which were mentioned most often as vocational training objectives:

Machine shop workers (punchpress, lathe, etc.) . . .	9.4 %
Radio-TV repairmen . . . . .	6.8 %
Electricians . . . . .	6.0 %
Cooks, chefs and bakers . . . . .	5.6 %
Carpenters . . . . .	4.5 %
Mechanics, auto and aircraft . . . . .	4.5 %
Machinists . . . . .	4.5 %
Mechanics, (unspecified) . . . . .	3.4 %
Welding . . . . .	3.4 %
Barbers and beauticians . . . . .	3.0 %
Air-conditioning and refrigeration work . . . . .	2.6 %
Clerical workers . . . . .	2.6 %
Diesel mechanics . . . . .	2.6 %
Engineers (excluding electronics) . . . . .	2.6 %
Engineers, electronic . . . . .	2.6 %
Janitors and maintenance workers . . . . .	2.3 %
Sales workers . . . . .	2.3 %
Plumbers . . . . .	1.9 %
Supervisors, foremen, inspectors . . . . .	1.9 %
Technicians (medical, dental, X-ray) . . . . .	1.9 %
Bricklayers . . . . .	1.5 %
Hospital attendants (orderlies and porters) . . . . .	1.5 %
Painters (construction and maintenance) . . . . .	1.5 %
Porters and bus boys . . . . .	1.5 %
Stationary engineers . . . . .	1.5 %

Table 9-16: Interest in Obtaining Free Training for a Better Job: Skid Row in Chicago, 1957

Interest in training for men reporting	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers
All	20-44 years				45-64 years						
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Interested in free training	74.8	79.3	76.0	84.2	78.9	88.7	64.6	67.5	63.2	75.7	67.5
No interest in free training	25.2	20.7	24.0	15.8	21.1	11.3	35.4	32.5	36.8	24.3	32.5
Too old, sick, retired	15.3	10.2	15.4	9.1	6.3	...	15.6	23.5	28.5	16.2	22.5
Satisfied with present job	9.1	10.2	10.1	6.7	12.7	9.2	17.7	7.4	8.3	4.1	8.1
Don't think can learn now	1.7	1.3	1.4	...	2.1	2.1	2.1	2.4	...	4.1	3.8
No information re reason	0.3	...	...	...	...	...	...	0.8	2.1	...	...
No information re interest	6.0	5.1	2.8	9.8	3.7	4.1	3.0	7.4	7.7	10.8	5.3

Table 9-17: Kind of Training Wanted by Men Who Were Interested in Obtaining Free Training

Kind of training desired for those interested	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers			Total	Teetotalers & light drinkers	Moderate drinkers	Heavy drinkers
					All	20-44 years	45-64 years				
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Professional, technical, and kindred workers . . . . .	12.3	10.5	13.3	7.9	10.2	6.4	17.7	15.7	16.5	3.6	21.3
Farmers and farm managers . . . . .	0.3	0.4	...	...	1.1	...	3.2	...	...	...	...
Managers, officials, and proprietors (except farm) . . . . .	1.2	1.2	1.9	...	1.6	2.4	...	1.2	...	5.4	...
Clerical and kindred workers . . . . .	3.7	3.7	5.7	6.5	...	...	...	3.5	3.3	5.4	2.8
Sales workers . . . . .	3.0	4.5	1.9	2.2	8.6	8.8	8.1	...	...	...	...
Craftsmen, foremen, and kindred workers . . . . .	48.2	52.1	50.6	41.7	61.3	64.0	54.8	40.8	29.7	35.7	52.8
Operatives and kindred workers . . . . .	16.2	15.3	14.6	12.2	18.2	21.6	11.3	18.0	19.8	37.5	6.5
Service workers . . . . .	11.5	10.7	9.5	14.4	9.1	8.0	11.3	12.9	14.3	5.4	15.7
Farm laborers and foremen . . . . .	...	...	...	...	...	...	...	...	...	...	...
Laborers except farm and mine . . . . .	0.4	...	...	...	...	...	...	1.2	...	...	2.8
No information re kind of training desired . . . . .	16.2	13.6	17.1	16.5	8.6	8.8	8.1	21.2	30.8	17.9	14.8

G. I. Training. Since many of the men on Skid Row are veterans, they have already had a chance to get free vocational training of the type that has just been discussed. In order to find out to what extent they had made use of the "G. I. Bill" to obtain additional education after service, all veterans of World War II and the Korean War were asked, "Did you try to get training under the G. I. Bill? (If Not, why not?)" Table 9-18 summarizes the results of this inquiry. Of all men on Skid Row, 38 percent were veterans and had been eligible for veterans educational benefits. Of these, 10.7 percent of the men, or 28 percent of those who had been eligible, had taken such training. About the same percentage of heavy drinkers and light drinkers had taken additional training.

Eligible veterans who had not taken training gave two major reasons for not having taken advantage of their veterans benefits: they had not been interested in getting training then, and they had been too anxious to get to work earning money when they got out of service. Smaller proportions reported they had family obligations. About 5 percent confessed they were too restless to study, and an additional 5 percent said they knew they couldn't complete a program of training because of their heavy drinking at the time of discharge from service. Ten percent said they had not taken advantage of the opportunity because they doubted their own ability. These self-doubters were teetotalers or light drinkers as frequently as they were heavy drinkers.

#### SUMMARY AND IMPLICATIONS

The "mystery" of why so many men on Skid Row do not work is quite simple. Four major factors are involved:

- (a) These men work at occupations and for industries where involuntary unemployment is a chronic condition, and where seasonal variations in unemployment are very high.
- (b) A high percentage of these men are physically disabled or handicapped. They are unable to hold steady jobs as laborers because of their health and disability status.
- (c) A high percentage of these men are past 40 years of age. Employers discriminate against older workers when hiring unskilled laborers. Rates of involuntary unemployment are very high, even among teetotalers and light drinkers, when the man has passed his 40th or 45th birthday.
- (d) Many of the minority of men who are heavy drinkers or who are chronic alcoholics are irregular in their work habits, and often do not care to work. They work only enough to "get by."

Quite often, the fourth of these factors--drinking--is claimed as the sole explanation for widespread unemployment on Skid Row. Evidence assembled in this chapter suggests that although drinking is involved, it is a factor in less than one-half the cases of unemployment, and even then the three other important factors are simultaneously present.

In other words, Skid Row is a regional collecting place for physically disabled common laborers who are in poor health and who are having difficulty getting work, even though they may not drink. Employment experts often talk of "unemployables"--persons who lack any skills or qualifications for which there is a demand in the "labor market" at the particular time. These unemployable men may be of low intelligence, may

Table 9-18: Eligibility of Homeless Men for Educational Benefits Under the G. I. Bill, Use of These Benefits, and Reasons for Not Using.

Item	Total	Drinking-age-disability classification of men under 65 years of age									
		Slightly and not handicapped						Moderate and severe handicap			
		Total	Tee-total-ers & light drink-ers	Mode-rate drink-ers	Heavy drinkers			Total	Tee-total-ers & light drink-ers	Mode-rate drink-ers	Heavy drink-ers
All	20-44 years				45-64 years						
<b>TRAINING UNDER THE G.I. BILL</b>											
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Eligible veteran, no training	27.5	32.7	26.2	27.3	42.3	55.1	23.2	19.4	16.7	9.6	26.6
Veteran, obtained training .	10.8	13.2	7.9	17.5	14.6	20.4	6.1	6.9	1.3	10.8	10.1
Veteran, not eligible . . . .	9.8	6.4	3.7	9.3	6.5	7.5	5.1	15.2	22.4	9.6	11.2
Not a veteran . . . . .	45.1	41.4	55.6	39.3	30.5	12.9	56.6	51.0	57.7	55.4	42.6
No information on training of eligibility . . . . .	6.8	6.4	6.5	6.6	6.1	4.1	9.1	7.6	1.9	14.5	9.5
Percent of eligible veterans who took training . . . . .	28.2	28.8	23.2	39.1	25.7	27.0	20.8	26.2	7.2	52.9	27.5
<b>REASONS NO TRAINING OBTAINED BY VETERANS ELIGIBLE FOR G.I. BILL OF THOSE WHO ANSWERED</b>											
Married or family obligations	5.9	5.2	5.4	6.0	4.8	6.2	...	7.6	...	...	13.3
Anxious to get to work, make money . . . . .	24.6	25.2	35.7	24.0	20.2	25.9	...	22.8	34.6	37.5	13.3
Too restless to study . . . .	5.2	5.7	5.4	4.0	6.7	8.6	...	3.8	11.5	...	...
Was drinking too heavy . . . .	5.9	5.2	...	...	10.6	7.4	21.7	7.6	...	...	13.3
Was not interested then . . .	38.1	38.6	21.4	38.0	48.1	45.7	56.5	36.7	34.6	...	44.4
Was in jail, hospital . . . .	0.7	...	...	...	...	...	...	2.5	...	25.0	...
Doubted own ability to benefit . . . . .	9.7	10.0	10.7	6.0	11.5	11.1	13.0	8.9	7.7	...	11.1

have developed a severe hernia, or may simply be past 45 years of age and hence too old for unskilled labor. Such men who have no family of other resources to fall back on, are slowly forced to drift into this pool of unemployed. The chronic alcoholic is only a special case in a general process. The labor problem of Skid Row, therefore, is not simply one of alcoholism but is a matter of broad employment policy and a by-product of the functioning of the labor market. In recent decades the nation has attempted to put a "floor" underneath the labor market, to make it impossible for persons to be brutalized by the working of impersonal competitive processes. Minimum wage laws and unemployment compensation are intended to serve this function. There are flaws and loopholes in this program, and through force of circumstance a number of workingmen sink to a level below the socially established minimum. Among the Skid Row workingmen are those who do not work in an interstate industry, who have not established legal residence in any state, who do not work in industries covered by Social Security, or who work for unscrupulous employers who avoid the spirit of the law by declaring their employees (working at inhumanly low rates of pay) to be "self-employed independent operators." Some are unskilled men who simply cannot locate a job because of lack of intelligence, because of physical defects, or because of age. One of the ways to shrink Skid Row is to patch some of the leaks in the "floor" of social legislation that seeks to establish minimum employment conditions. Any American citizen, if denied work opportunities for a prolonged span of time would end up in the Skid Row soup-line unless saved from this fate by a family or by some program of social legislation--irrespective of his drinking habits. The validity of this generalization has already been established by the huge mushrooming of Skid Row that took place during the economic depression of 1929-1939. We tend to forget that a similar process is operating continuously, though on a less massive scale, even during times of economic prosperity.

Meanwhile, a high proportion of the men who are in this plight express an interest in obtaining vocational training or retraining to fit them for jobs higher in the socio-economic scale. Their ambitions seem to be modest and within the realm of possibility if they are sincere in their wishes and have the necessary intelligence and drive to carry through. Perhaps, at some future date, a public or private welfare agency might be interested in trying to bring hope and renewed efforts at self-rehabilitation to the homeless men on Skid Row by including occupational therapy as a part of the overall welfare program.

## Chapter 10

### VETERANS ON SKID ROW

More than one half (54 percent) of the Skid Row residents reported they had been in military service at some time in their lives. Almost 30 percent were veterans of World War II, and 20 percent had served either in World War I or at some time before World War II. Only 6 percent of the men had served after World War II, and only 3 percent were veterans of the Korean War. Following is a summary of the military service of homeless men.

<u>When served:</u>	<u>Percent of men</u>	<u>Number of men</u>
Total . . . . .	100.0	11,926
No military service . . . . .	46.5	5,546
Military service* . . . . .	51.0	6,082
World War I . . . . .	12.3	1,467
World War II . . . . .	29.7	3,542
Korean War . . . . .	3.2	382
Other, before World War II . . . . .	7.9	942
Other, after World War II . . . . .	5.9	704
No information . . . . .	2.5	298

\*The number and percent of men in all wars combined adds to more than the figures for military service because some men served more than one period.

Branch of Service. As the following summary shows, almost two thirds of the service terms were served in the Army. Almost all of the remainder were served either in the Navy or Air Force.

<u>Branch of military service</u>	<u>Percent of terms served</u>
Total . . . . .	100.0
Army . . . . .	65.8
Navy . . . . .	18.4
Air Force (including Army Air Force) . . . . .	12.2
Marine Corps . . . . .	1.3
National Guard . . . . .	2.3
Coast Guard . . . . .	...

Reasons for no military service. The 46.5 percent of men who had no military service were asked the reasons for having been excused. The reasons given and the percent of men having each reason were:

<u>Reasons for no military service</u>	<u>Percent</u>
Total . . . . .	100.0
Not of military age during emergency . . . . .	27.8
Not physically qualified . . . . .	32.8
Deferred because of occupation--farm . . . . .	1.6
Deferred because of occupation--nonfarm . . . . .	18.0
Deferred because of dependents . . . . .	7.3
Registered, physically fit, but not called . . . . .	6.8
Other -- in jails, etc. . . . .	5.2

Physical disqualification was mentioned by almost a third of the nonveterans as the reason for not having military service. Men who were 50 to 60 years of age at the time of the interview would have been rather young to serve in World War I and rather old to serve in World War II; 28 percent of the men claimed that they were not of military age during time of military draft. Only a comparatively small percentage of the men was deferred because of their occupation or because they had dependents.

Military assignment. All but a small share of the men had a line assignment (combat or operations duties).

<u>Military assignment</u>	<u>Percent of assignments</u>
Total. . . . .	100.0*
Line assignments (infantry, artillery, flying) . . . . .	87.3
Supply . . . . .	17.0
Technical. . . . .	5.9
Other. . . . .	0.5
No information . . . . .	6.8

\*It was possible for a respondent to have two or more military assignments.

The length of the men's service ranged widely, with about one half falling between  $1\frac{1}{2}$  to 4 years. A substantial proportion of the veterans on Skid Row have had extended military service. Almost one fourth of the veterans (one homeless man in eight) has served for 4 to 8 years.

<u>Length of service</u>	<u>Percent distribution</u>
Total. . . . .	100.0
Less than 7 months . . . . .	8.0
7 months to 12 months. . . . .	6.2
13 to 18 months. . . . .	7.6
19 to 24 months. . . . .	11.5
25 to 36 months. . . . .	20.9
37 to 48 months. . . . .	16.8
49 to 60 months. . . . .	11.2
61 to 72 months. . . . .	5.2
73 to 96 months. . . . .	7.5
No information . . . . .	5.2

Type of discharge. All but about 14 percent of the men with service received an honorable discharge when their service was completed. Of those who did not get an honorable discharge, about two thirds were given a medical discharge, while one third were given bad conduct, dishonorable, or similar discharges. Thus, if the reports of the men themselves are to be trusted, Skid Row does not seem to be unduly populated with men whose military record was bad. If the proportions of the sample reliably extend to the entire Skid Row population, there are between 450 and 500 men on Skid Row with bad conduct and dishonorable discharges.



<u>Type of discharge</u>	<u>Percent</u>
Total. . . . .	100.0*
Honorable. . . . .	81.5
Medical. . . . .	10.0
Dishonorable . . . . .	2.7
Without honor. . . . .	1.0
Bad Conduct. . . . .	2.9
No information . . . . .	5.3

<u>Reasons for discharge</u>	<u>Percent</u>
Total. . . . .	100.0*
End of war, end of enlistment. . .	81.9
Wounds . . . . .	8.3
Psychiatric reasons. . . . .	1.3
Theft, crime, violence . . . . .	5.9
No information . . . . .	5.3

\*Can add to more than 100 percent because some men were discharged two or more times.

Highest rank held while in service. As the following summary shows, almost none of the men were commissioned officers, and comparatively few were petty officers with more than a corporal's rating or the equivalent. Almost one half of the men were in the bottom two ranks.

<u>Highest rank held</u>				<u>Percent distribution</u>
<u>Army</u>	<u>Air Force</u>	<u>Marine Corps</u>	<u>Navy</u>	
Total . . . . .				100.0
2nd Lt. & above	2nd Lt. & above	2nd Lt. & above	Ensg. & above	0.9
Chief W. O. & Warrant Of. J.G.	Chief W. O. & War. Of. J.G.	Chief W. O. & War. Of. J.G.	Chief W. O. & War. Of. J.G.	...
Master Sgt.	Master Sgt.	Master Sgt.	Chief P. O.	2.4
Sgt. 1st Class	Tch. Sgt.	Tch. Sgt.	P.O. 1st Cl.	14.5
Sgt.	Staff Sgt.	Staff Sgt.	P.O. 2nd Cl.	16.8
Corporal	Airman 1st Cl.	Sgt.	P.O. 3rd Cl.	13.9
Pvt. 1st Cl.	Airman 2nd Cl.	Marine Corp.	Navy seaman	24.1
Private	Airman 3rd Cl.	Private	Seaman, Appr.	20.2
No information . . . . .				7.2

Military punishment received. While in military service, 45 percent of the veterans received military punishment of some sort. About one quarter of this was of the mild disciplinary type meted out by local commands: loss of liberty, special duty, etc. The other three quarters who received punishment were given more severe sentences, involving imprisonment. One third of all homeless men who were also veterans had served at least some time in a military prison. Most of these prison sentences were short--less than 6 months. But these statistics do indicate that about one homeless man in 9 is a veteran who had misbehaved sufficiently to be given a short imprisonment.

<u>Military punishment received</u>	<u>Percent of men</u>
Total . . . . .	100.0
No punishment received . . . . .	55.0
Punishment by local command (company punishment), no imprisonment . . . . .	12.1
Punishment by local command, imprisonment less than 30 days . . . . .	7.5
Punishment by Court Martial, imprisonment 30 days or less and/or fine . . . . .	5.1
Punishment by Court Martial, imprisonment and/or fine:	
1-6 months . . . . .	6.0
6-12 months . . . . .	2.8
1-2 years . . . . .	0.4
Punishment by discharge . . . . .	13.0
No information . . . . .	5.4

Effect of military service. When asked to indicate what effect, if any, military service had upon them, almost one half of the men reported that there had been no effect. Of the remainder, about one half thought the effect upon them was good and one half thought it was bad. Those who thought the service had affected them adversely tended to mention three major things: heavier drinking; loss of ambition and drive; increased restlessness and dissatisfaction. A total of 20 percent of all veterans gave responses of this type. Those who saw benefit from their service said that it tended to "make a man" of them, taught them a skill, or gave them a more comfortable and secure living than they had ever had before. It is interesting to note that 7 percent of the veterans said they "never had it so good" as when in military service.

<u>Effect of military service</u>	<u>Percent of veterans</u>
Total . . . . .	100.0
No effect . . . . .	45.9
Caused me to drink heavier . . . . .	8.8
Caused me to lose ambition, interest in work, in life . . . . .	2.5
Caused me to be restless, unsettled, dissatisfied with previous way of living . . . . .	7.8
Helped make a (grown up) man of me, taught me to take care of myself, be independent . . . . .	8.2
Taught me a trade or skill . . . . .	1.2
Changed my attitude, outlook on life, for the better . . . . .	6.1
Changed my attitude, outlook on life, for the worse . . . . .	1.3
"I never had it so good," it was better than I had ever lived before . . . . .	7.0
Effect of service mentioned, but none of the above . . . . .	4.3
No information . . . . .	6.9

Overseas service. Among those who saw military service, only about one third were stationed at sea or overseas. Of those who were stationed overseas, 42 percent saw combat service. Thus, about 14 percent of the veterans on Skid Row (1 in 7) had seen combat service. This percentage probably is not higher than in the general veteran population. Hence, any theory that Skid Row is populated by men driven to drink by prolonged and unusually bloody experiences appears to be unsound.

<u>Overseas and combat service of men with military service</u>	<u>Percent of men</u>
<u>Overseas service</u> . . . . .	<u>100.0</u>
Stationed overseas . . . . .	34.0
Not stationed overseas . . . . .	60.5
No information . . . . .	5.5
 <u>Combat service</u>	 <u>100.0</u>
No combat service . . . . .	57.8
Combat service . . . . .	42.2

Veterans as a group are considerably more inclined to be heavy drinkers or alcoholic derelicts than men on Skid Row who had no military service.

Drinking classification	No military service	Total	Veterans--military service		
			Before World War II	World War II	After World War II
Total . . . . .	100.0	100.0	100.0	100.0	100.0
Alcoholic derelicts . . . . .	8.6	15.4	9.5	20.1	13.3
Heavy drinkers . . . . .	15.5	22.7	9.5	33.8	17.1
Moderate drinkers . . . . .	20.6	25.0	27.3	22.0	29.5
Light drinkers . . . . .	38.4	21.7	31.6	16.5	16.2
Teetotalers . . . . .	16.8	15.2	22.1	7.6	23.8

Most of this trend appears to be a product of the age composition of the veteran and nonveteran groups, however. Older veterans who served before World War II were no more alcoholic than nonveterans, and both the nonveterans and the pre-World War II veterans are quite elderly in their age composition. Veterans of World War II are much more inclined to be heavy drinkers and alcoholic derelicts than either the nonveterans or other groups of veterans. They are at the age where the rates of alcoholism are highest. However, there seems to be an additional relationship between World War II veterans and problem drinking. Most World War II veterans were aged 35-44 at the time of the survey. By comparison, the following drinking classification of these age groups with the above information for World War II veterans shows that World War II veterans were more inclined to be problem drinkers than other men of their age group. The difference, though striking, is only moderately large.

<u>Drinking classification</u>	<u>35-39 years</u>	<u>40-44 years</u>
Alcoholic derelicts. . . . .	17.4	14.7
Heavy drinkers . . . . .	28.6	29.9
Moderate drinkers. . . . .	31.5	23.4
Light drinkers . . . . .	16.4	24.8
Teetotalers. . . . .	6.1	7.2

Summary. Unfortunately, there are no "control data" available concerning veterans in the general population with which to compare the Skid Row veterans. In general, the picture one gets of the veteran on Skid Row is that he was a low-ranking soldier or sailor assigned to line duty, who probably saw less overseas service and less combat than the average veteran. Apparently, a small but substantial number were "bad boys" before they entered the service, and received major punishment. But more than 90 percent were honorably discharged at the expiration of their term or because of wounds. According to the reports of the men, only a small percent believed that military service was even partially responsible for their being on Skid Row. As many men stated that they benefited from service as claimed they were injured by it. Although military service may have been an indirect factor in the personal disorganization that leads men to Skid Row, it does not appear to be a major direct factor. One of the most surprising aspects of the data is that, in comparison with the size of the military force involved, veterans of World War I and before World War II are overrepresented, and veterans of World War II and Korea are underrepresented. Yet, the veterans of World War II who live on Skid Row are more inclined to be heavy drinkers and alcoholic derelicts than either the nonveterans or any other group of veterans, and this is only partially accounted for by the age composition.

## Chapter 11

### THE HOMELESS OLD MAN AND PENSIONER ON SKID ROW

In Chapter 2 it was shown that 47 percent of all residents of Skid Row were "pensioners," that is, they were receiving payments of money or benefits paid from public funds. This chapter focuses on this group of men, who are here called "pensioners."

Number of pensioners of each type. On the assumption that Chicago's Skid Rows contain 12,000 men, the best estimate of the number of pensioners of each type is as follows:

Pension status	Estimated number of men on Chicago's Skid Rows, 1957
Total . . . . .	12,000
Non-pensioners . . . . .	6,372
Pensioners, total* . . . . .	5,628
Public assistance . . . . .	2,640
Old-age assistance . . . . .	264
Social security . . . . .	1,236
Military pension . . . . .	660
Railroad retirement . . . . .	204
Unemployment compensation . . . . .	1,428
Combinations of pensions:	
Public assistance and social security . . . . .	696
Public assistance and railroad retirement . . . . .	60
Railroad retirement and old age assistance . . . . .	60

\*Some of these men hold pensions from two sources.  
These combinations are indicated below.

For purpose of analysis, the pensioners may be grouped into three major types, as follows:

- (a) Persons on earned retirement--men with Social Security, military, or railroad retirement pensions for elderly men.
- (b) Welfare pensioners--men on general public assistance (relief), or Old Age Assistance.
- (c) Temporary pensions--unemployment compensation.

Table 11-1: Pension Status by Age: Chicago Skid Row, 1957.

Age	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total all ages . . . . .	100.0	100.0	100.0	100.0	100.0
20 - 29 . . . . .	4.4	7.4	...	...	4.9
30 - 34 . . . . .	5.8	8.7	4.4	0.8	3.8
35 - 39 . . . . .	11.3	14.8	3.8	7.8	14.8
40 - 44 . . . . .	12.4	15.7	8.5	4.3	13.1
45 - 49 . . . . .	16.2	20.1	12.0	3.5	18.6
50 - 54 . . . . .	13.2	11.8	18.7	4.7	21.9
55 - 59 . . . . .	10.9	9.4	19.0	3.5	15.3
60 - 64 . . . . .	8.3	7.6	16.1	4.7	4.4
65 - 69 . . . . .	9.3	3.5	11.1	30.4	3.3
70 and over . . . . .	8.2	0.9	6.3	40.5	...
Horizontal percent distribution*. . . . .	100.0	51.9	18.4	15.0	10.7

\*Includes 4.1 percent for whom no information concerning pension status was available.

When grouped thus, with the combinations of pensions divided among the types, the number of pensioners in each major type is as follows:

Major type of pension	Estimated number of men on Chicago's Skid Rows, 1957	Percent of all men on Skid Row	Percent of all pensioners on Skid Row
Total pensioners . . .	<u>5,628</u>	<u>46.9</u>	<u>100.0</u>
Earned retirement . . .	1,694	14.1	30.1
Welfare pensioners . . .	2,502	20.9	44.5
Temporary pensioners . .	1,432	11.9	25.4

Thus, of roughly 5,700 pensioners on Skid Row, 30 percent are living on pensions earned while they were younger, almost one-half are supported as public dependents, and one-fourth are temporary public dependents receiving unemployment compensation. This last figure is made quite large by the number of men spending the winter on their "rocking chair pay" from railroad retirement.

The principal purpose of this chapter is to learn how these three groups of men differ from each other, and how all three differ from the group of men who do not receive pensions.

Age in relation to pension status. All but about 30 percent of the earned retirement pensioners are age 65 or over. This is a higher rate of retirement before 65 than is found among the general population, and represents retirement because of disability. Men who are retired on military, Social Security, or railroad pensions before 65 tend to be disabled veterans or others who have had an industrial accident or whose health has been broken.

The group of pensioners on public welfare are neither extremely young nor elderly, but are highly concentrated in the middle-aged group between 45 and 64 years (roughly two-thirds of the welfare pensioners were within this age range). The men on temporary (unemployment) pensions tend to be much younger, with a substantial proportion being 35-44 years of age.

Men who do not have a pension tend to be younger, on the average, than men who are pensioned. Almost everyone who reaches age 65 is pensioned, either on an earned pension or a welfare pension. In fact, by the time Skid Row men reach age 50, a substantial proportion are on welfare pensions, and the percentage rises with increasing age. This is because it is at these ages that unskilled homeless workers begin to experience health breakdown and are no longer able to support themselves.

Educational attainment in relation to pension status. Men who are not pensioned tend to have a higher educational attainment than men who are pensioned, while the men on earned retirement pensions tend to be highly concentrated in the grammar school educational groups. This is largely a function of age; younger men tend not to have pensions and they also tend to have more education. Despite the fact that they are younger, the people on public welfare tend to

Table 11-2: Pension Status by Education of Homeless Men: Chicago Skid Row, 1957.

Education	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0	100.0
Less than 5 years of school .	17.0	13.8	21.2	24.5	20.8
Grammar school: 5-7 years .	20.8	19.3	23.1	21.0	21.3
Grammar school: 8 years .	19.8	18.9	21.5	24.1	16.4
High school: . . .1-3 years .	20.3	23.0	19.9	8.2	23.0
High school: . . . 4 years .	13.1	17.0	6.6	9.0	13.7
College: . . . .1-4 years .	5.7	6.0	2.8	9.0	1.6
No information . . . . .	3.4	2.0	4.7	4.3	3.3
Horizontal percent distribution* . . . . .	100.0	51.9	18.4	15.0	10.7

\*Includes 4.1 percent for whom no information concerning pension status was available.



be less educated than the other types of earned retirement pensioners. This suggests that many of them may be "unemployables" who are on welfare because they have none of the educational qualifications that help to secure and retain a steady job.

Pension status in relation to drinking behavior. Very few men who are on earned retirement pensions are problem drinkers. Table 11-3 shows that only 18 percent of this group of pensioners are heavy drinkers or alcoholic derelicts, which is only about one-half of the proportion of heavy drinkers among the Skid Row population as a whole. This finding belies the assertion sometimes heard that when elderly men who have spent a lifetime as common laborers get their Social Security or railroad retirement pensions, they voluntarily retire to Skid Row and spend the rest of their days doing what they like to do best--drink. Instead, the facts seem to indicate that more than 80 percent of the earned retirement pensioners who live on Skid Row live there against their will, because inflation has destroyed the purchasing power of their monthly pension check, and their ability to live elsewhere.

A very surprising aspect of table 11-3 is the finding that more than one-half (55 percent) of persons on public assistance are teetotalers or light drinkers. It has been believed by many that public welfare cases are relegated to Skid Row hotels and restaurants only when they are known to be confirmed alcoholics who cannot be trusted with cash for meals or lodging. Such men are given a "disbursing order" addressed to a particular cubicle hotel or Skid Row restaurant, usually one chosen by the recipient or recommended by the social worker. The statistics indicate that the Department of Welfare is forcing more than 1,200 men (590 teetotalers and 635 light drinkers) to live on Skid Row against their will, simply as a matter of public economy. This policy, which is a carryover from the old Chicago Department of Welfare, has been justified as a matter of necessity because funds are not available for supporting these welfare cases in other neighborhoods. If it is sincere in wishing to conquer Skid Row, the public can reduce the number of Skid Row residents by at least one-eighth (and probably more, because moderate drinkers were not considered), simply by seeing that enough welfare funds are appropriated to make it unnecessary for homeless welfare cases to live on Skid Rows.

A fact that is not surprising is that the men living on temporary pensions (unemployment compensation) are highly concentrated in the heavy drinking and alcoholic derelict groups. Only 4 percent of these men were teetotalers and 18 percent were light drinkers. Almost 50 percent of unemployment compensation recipients were heavy drinkers or derelicts, and 28 percent were alcoholic derelicts. A high percentage of these men are the gandy dancers, discussed in Chapter 9, who work in summer and spend their winters drinking on Rocking Chair pay. It is reputed that they are joined by men who cannily hold steady jobs just long enough to qualify for unemployment compensation and then suddenly become "unemployed" until their accumulated compensation rights expire. Thus, on Skid Row two desirable programs of social legislation to protect men from unemployment have been perverted by some to institutionalize alcoholic dereliction. Welfare authorities might give some consideration to administering such aid in a way that would encourage the workman to seek employment during the winter months and to assure that his payments do not lead to a winter-long spree of debilitating drinking.

Table 11-3: Pension Status by Drinking Classification of Homeless Men:  
Chicago Skid Row, 1957

Drinking Classification	Total All Skid Row Men	Pension Status				Pension Status Unknown
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner	
Total . . . . .	100.0	100.0	100.0	100.0	100.0	
Teetotaler . . . . .	14.8	13.5	18.4	24.5	3.8	
Light drinkers . . . . .	28.4	25.8	37.0	33.9	17.5	
Moderate drinkers . . . . .	24.4	24.4	20.9	23.7	30.6	
Heavy drinkers . . . . .	19.9	24.4	13.9	11.3	20.2	
Alcoholic derelicts . . . . .	12.6	11.9	9.8	6.6	27.9	
Horizontal percent distribution . . . . .	100.0	51.9	18.4	15.0	10.7	4.1
Teetotaler . . . . .	100.0	47.2	22.8	24.8	2.8	2.4
Light drinkers . . . . .	100.0	47.2	24.0	17.9	6.6	4.3
Moderate drinkers . . . . .	100.0	51.9	15.8	14.6	13.4	4.3
Heavy drinkers . . . . .	100.0	63.6	12.9	8.5	10.9	4.1
Alcoholic derelicts . . . . .	100.0	49.1	14.4	7.9	23.6	5.1

However, it should not be concluded that all heavy drinkers on Skid Row are gandy dancers or men living on unemployment compensation. Table 11-3 shows that more than one-third of the men who are not pensioners are heavy drinkers. The bottom part of this table shows the pensioner status of the various drinking groups. As the above discussion suggests, a high percentage of teetotalers and light drinkers are earned retirement or welfare pensioners, while one alcoholic derelict in four was being kept alive by unemployment compensation.

The findings recited here about unemployment compensation should not be allowed to damn the programs; the gandy dancers who do not want to spend the winter drinking apparently do not come to Skid Row, but stay in other towns or other parts of Chicago.

Pension status in relation to drinking-disability-age classification. Men who are on earned retirement pensions are disabled in about 79 percent of the cases. Although they are younger, almost the same proportion of men who had welfare pensions were also disabled. Thus, physical disability is by far the leading reason why a homeless man is given a welfare pension. When age and physical disability are combined, they account for 82 percent of the welfare pensions. Of the 18 percent of welfare pensions that were given to men who were neither elderly nor physically disabled (about 450 pensioners), more than one-half went to men who were teetotalers or light drinkers. The often-heard comment on Skid Row that large numbers of able-bodied "bums" managed to get themselves on the welfare rolls by deceit and conniving, appears not to be correct. If the statistics available here are correct, then only about 100 men (about 4 percent of alcoholic derelicts) possibly might have accomplished this. However, there are several reasons, not considered here, that could account for the presence of even this number of men on the relief rolls. In addition, the number cited above is subject to sampling error, and hence, could be either somewhat smaller or larger than indicated. A homeless man who has resided in Illinois for one year, who has exhausted all unemployment compensation rights, and who has been unable to obtain employment despite all efforts, is eligible for public welfare, provided he accepts a job if the welfare department finds one for him. In view of the high unemployment rates reported in Chapter 9, it is surprising that the number of younger able-bodied men on public assistance is as small as it is.

Only about one-third of the men on temporary pensions are severely or moderately handicapped; the other two-thirds are only slightly handicapped, or not handicapped at all. But, as has already been discussed, an extraordinarily large percentage of heavy drinkers or alcoholic derelicts are in this group. Table 11-4 shows that one-fifth of all Skid Row recipients of unemployment compensation are young men between the ages of 20 and 44 who are heavy drinkers or alcoholic derelicts, but who are only slightly physically handicapped, if at all.

Usual occupation last year and pension status. Table 11-5 reports the usual occupation of Skid Row men during the past year according to pension status. The last line of this table reports the proportion of men who did not work during the past year. Almost one-half of the men who are on earned retirement pensions had worked on at least one job during the year preceding the interview. If the man had retired during the year, these statistics report the kind of work he did before he retired. In all other cases, the table reports the

Table 11-4: Pension Status by Drinking-disability-age Classification of Homeless Men: Chicago Skid Row, 1957

Drinking-disability-age Classification	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0	100.0
A. SEVERELY AND MODERATELY HANDICAPPED . . . . .	46.5	27.5	73.5	78.7	31.2
1. Elderly -- 65 years of age and older . . . . .	14.0	3.3	12.7	62.7	...
Teetotaler and light drinkers	9.7	2.0	10.8	40.9	...
Moderate and heavy drinkers	4.3	1.3	1.9	21.8	...
2. Young and middle aged -- 20-64 years . . . . .	32.5	24.2	60.8	16.0	31.2
Teetotaler and light drinkers	12.6	8.7	28.5	8.2	8.7
Moderate drinkers . . . . .	6.7	5.3	13.3	...	6.6
Heavy drinkers and derelicts	13.2	10.2	19.0	7.8	15.9
20-44 years . . . . .	4.3	3.5	3.5	4.3	6.6
45-64 years . . . . .	8.9	6.7	15.5	3.5	9.3
B. SLIGHTLY AND NOT HANDICAPPED . . . . .	53.5	72.5	26.6	21.4	68.8
1. Elderly -- 65 years of age and older . . . . .	3.5	1.0	4.8	8.2	3.2
Teetotaler and light drinkers	2.3	1.0	3.8	3.5	1.6
Moderate and heavy drinkers	1.2	...	1.0	4.7	1.6
2. Young and middle aged -- 20-64 years . . . . .	50.0	71.5	21.8	13.2	65.6
Teetotaler and light drinkers	18.6	27.6	12.3	5.8	10.9
Moderate drinkers . . . . .	13.3	18.1	5.7	3.1	22.4
Heavy drinkers and derelicts	18.1	25.8	3.8	4.3	32.3
20-44 years . . . . .	10.4	14.3	1.9	3.1	20.8
45-64 years . . . . .	7.7	11.5	1.9	1.2	11.5
Horizontal percent distribution* . .	100.0	51.9	18.4	15.0	10.7

\*Includes 4.1 percent for whom no information concerning pension status was available.

Table 11-5: Usual Occupation During the Past Year, Homeless Men: Chicago Skid Row, 1957

Usual Occupation During Past Year	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total, who worked . .	100.0	100.0	100.0	100.0	100.0
WHITE COLLAR . . . . .	7.6	9.7	...	9.7	4.4
Professional, technical . .	0.2	...	...	...	...
Manager, proprietor, official . . . . .	1.1	2.1	...	...	...
Messenger, office boy . . .	1.2	0.4	...	2.9	2.2
All other clerical . . . . .	4.2	5.9	...	5.3	2.2
Sales . . . . .	0.9	1.3	...	1.5	...
BLUE COLLAR . . . . .	65.0	83.3	31.5	32.0	79.8
Craftsmen, in mfg. . . . .	2.2	4.2	...	...	...
Craftsmen, in nonmfg. . . .	3.0	4.8	2.9	...	...
Operatives, in mfg. . . . .	5.3	7.0	2.9	2.9	6.7
Operatives, in nonmfg. . . .	5.0	7.5	1.4	...	4.5
Restaurant -- cooks, waiters, counter . . . . .	4.4	7.5	...	1.5	...
Restaurant -- dishwashers, etc. . . . .	10.3	13.5	10.0	4.3	4.5
Service workers, other . . .	11.8	13.5	10.0	11.6	8.2
Laborers (by industry), total . . . . .	23.0	25.3	4.3	11.7	55.9
Construction and agriculture . . . . .	3.8	5.4	...	1.5	7.5
Factory and mining . . . . .	2.5	3.5	...	2.9	...
Transportation . . . . .	12.6	11.1	4.3	5.8	42.5
Wholesale and retail . . . .	2.8	4.2	...	1.5	2.2
Other . . . . .	1.3	1.1	...	...	3.7
Business service . . . . .	...	...	...	...	...
Personal service . . . . .	0.2	...	...	...	1.5
Entertainment . . . . .	0.7	0.4	...	...	2.2
Religion, welfare, public admin. . . . .	0.4	0.7	...	...	...
No information concerning usual occupation last year	4.4	4.8	2.9	1.9	4.5
Did not work in past year . .	22.9	2.0	65.6	56.5	11.2
Horizontal percent distribution* . . . . .	100.0	52.5	16.1	15.9	10.3

\*Includes 5.2 percent for whom no information concerning pension status was available.

work he had to supplement his retirement income. It can safely be said that at least one-third of the earned retirement pensioners had held one or more odd jobs in order to earn extra money. In view of the large percentage of men among this group who are disabled or too old to work, this proportion implies a very substantial effort to increase income. Dishwashing in restaurants and delivering handbills are the two most common jobs these men get, although a few get jobs as laborers on railroad gangs, in stockrooms of wholesale and retail establishments, or even in factories.

Only one-third of the men on welfare pensions had worked in the preceding year. This is as would be expected--these men are screened for public relief because they are no longer able to be self-supporting, either because of injury, disability, or other conditions which have kept them from being employed.

Pension status and usual industry of employment. Table 11-6 reports the types of industry in which the pensioners worked who had been employed during the preceding year. It shows that more of the younger men who are not pensioned tend to be employed in factories and at more skilled jobs than the men who are not pensioners. It also shows just how heavy is the concentration of gandy dancers on temporary wintertime pensions: 42.5 percent of all men receiving unemployment compensation on Skid Row were laborers in the transportation industry.

Pension status and wages earned last week. The question, "When a Skid Row pensioner works, how much money does he earn?" is answered in table 11-7. Since the number of pensioners who work is quite small, the size of the sample upon which the income distributions of this table are made is too small for very precise generalization. However, it is abundantly clear that a great majority of pensioners who work earn less than \$20 per week, and that at least 30 percent earned only \$10 a week or less. This is a function both of low wages and the small number of hours each week for which they are able to get work. The elderly Skid Row pensioner seeking work with which to supplement his meagre income is in a very poor position with respect to the labor market: in a very high percentage of cases he is either elderly or disabled and is operating in a situation where he is competing for unskilled jobs as a common laborer, surrounded by large numbers of younger able-bodied men who are also unemployed and looking for work. Hence, the wage bargain he makes tends to be on rather unfavorable terms.

Pension status and income received during the past year. Table 11-8 shows that the really poverty-stricken people on Skid Row are the pensioners who are on public welfare. This is only another example of the situation, which reveals itself with monotonous regularity throughout this study, that poverty, and the public policy for dealing with it, is a very substantial reason for the existence of Skid Row in Chicago, and that some of the most desperate people on Skid Row, financially, are welfare pensioners. About 70 percent of these men had received less than \$1,000 income in the year preceding the interview. In contrast, only 13 percent of the workingmen not on pensions had received so little income, and the men receiving unemployment compensation had fared even better. In fact, the most affluent group on Skid Row, in terms of total annual income, is not the group of men who were getting by without any pension at all, but the group of men receiving temporary unemployment compensation. In order to be eligible for unemployment compensation or "rocking chair pay" these men must have worked at steady jobs, which almost

Table 11-6: Pension Status by Usual Industry Last Year: Chicago Skid Row, 1957

Usual Industry Last Year	Total All Skid Row Men	Pension status				Total all Skid Row Men Working
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner	
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0
Agriculture . . . . .	2.7	3.1	...	1.4	6.0	3.5
Construction . . . . .	4.0	6.9	1.4	...	1.5	5.2
Manufacturing . . . . .	12.2	17.9	4.3	5.8	6.7	15.8
Transportation, except railroad . . . . .	3.0	3.4	...	1.4	4.5	3.9
Transportation, railroad	12.2	11.0	4.3	5.8	42.5	15.8
Wholesale & retail: except restaurant . . . . .	5.2	7.8	...	4.3	2.2	6.7
Wholesale & retail: eating and drinking . . . . .	15.9	21.5	11.5	8.7	6.7	20.7
Business services . . . . .	3.5	3.7	1.4	5.8	2.2	4.6
Personal services . . . . .	5.0	7.0	2.9	1.4	6.0	6.5
Entertainment . . . . .	4.6	5.7	2.9	2.9	2.2	6.0
Religious, welfare . . . . .	4.0	4.8	2.9	3.9	3.7	5.2
Industry not reported . . . . .	4.8	5.3	2.9	1.9	4.5	6.3
Not working last week . . . . .	22.9	2.1	65.6	56.5	11.2	...
Horizontal percent distribution* . . . . .	100.0	52.5	16.1	15.9	10.3	...

\*Includes 5.2 percent for whom no information concerning pension status was available.

Table 11-7: Wages Earned Last Week by Homeless Men: Chicago Skid Row, 1957

Wages earned last week	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0	100.0
\$ 0 - 9 . . . . .	6.9	8.9	3.8	6.6	6.0
\$10 - 19 . . . . .	6.8	11.1	...	2.3	4.9
\$20 - 29 . . . . .	6.0	9.9	1.0	3.5	1.6
\$30 - 39 . . . . .	3.7	5.2	1.9	1.2	3.3
\$40 - 49 . . . . .	5.4	9.7	...	1.2	...
\$50 - 69 . . . . .	5.5	8.7	1.0	4.3	1.6
\$70 or more . . . . .	4.8	8.5	...	1.2	...
No information . . . . .	0.9	0.7	...	1.2	...
Did not work last week .	60.0	37.4	92.4	78.6	82.5
Horizontal percent distribution* . . .	100.0	51.9	18.4	15.0	10.7

\*Includes 4.1 percent for whom no information concerning pension status was available.



Table 11-8: Pension Status by Calculated Income for Homeless Men: Chicago  
Skid Row, 1957

Calculated Income	Total All Skid Row Men	Pension Status			
		Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0	100.0
Less than \$500 . . . . .	7.8	10.9	7.8	1.4	3.3
\$ 500 - 749 . . . . .	7.2	6.0	15.5	1.4	6.0
\$ 750 - 999 . . . . .	19.3	8.8	47.4	33.3	4.0
\$1000 - 1249 . . . . .	10.8	6.0	9.9	26.1	12.8
\$1250 - 1499 . . . . .	5.3	6.6	...	5.3	8.1
\$1500 - 1999 . . . . .	12.6	14.8	2.6	15.9	14.8
\$2000 - 2499 . . . . .	10.8	14.1	5.2	6.3	11.4
\$2500 - 3499 . . . . .	12.5	13.9	5.2	4.3	29.5
\$3500 - 4499 . . . . .	6.6	10.2	...	...	10.1
\$4500 and over . . . . .	3.5	4.8	...	5.8	...
No information on income .	3.7	4.0	6.5	...	...
Horizontal percent distribution* . . . . .	100.0	52.9	18.3	16.4	11.8

\*Includes 0.6 percent for whom no information concerning pension status was available.

automatically means that their rate of pay was much higher than the non-pensioners who work at spot jobs. Almost 40 percent of the temporary pensioners had received \$2,500 or more income during the year--which is enough to support a single workingman in any good rooming house area of Chicago in which he cares to live. As has already been described, a large share of this more affluent group of pensioners are gandy dancers or factory workers who are also heavy drinkers and spend their time between jobs on Skid Row from choice rather than necessity.

Pension status and source of income. The sources from which pensioners receive their income during the past year are reported in table 11-9. Almost 60 percent of the men on retirement pensions had received income from no other source during the preceding year, while approximately one man in eight had received at least one-half of his income from another source. About one-half of the welfare pensioners had received no other funds except their pension benefits, and more than two-thirds of them had received 80 percent or more of their income from welfare sources. This suggests that a very high percentage of the Skid Row men who get on public relief must stay there for a comparatively long period of time, which is quite different from temporary unemployment compensation, where more than two-thirds of the men received less than 20 percent of their income from temporary pensions.

Pension status and number of months pension has been received during the past year. Table 11-10 indicates that 88 percent of the earned retirement pensioners and 58 percent of the welfare pensioners had received a pension payment during each of the 12 months preceding the interview. Men on welfare pensions tended to fall into two distinct groups--the large group just mentioned, of more or less "permanent" pensioners, and a smaller group who had received pensions for only 2 or 4 or 6 months. Most of this latter group consists of residents who are helped over temporary emergencies.

The group of men who receive unemployment compensation tend to spend a substantial proportion of the year in that status. About one-third of the men had received unemployment compensation or other related temporary benefits for 2 to 4 months during the preceding year, and an additional one-fourth had been pensioners for 4 to 6 months. One man in ten in this group even claimed being pensioned for 6 to 8 months, and a few had even longer tenure. It must be pointed out that not all of this was necessarily unemployment compensation--the men are classified according to their pension status at the time of the interview. They may have been on relief or receiving some other type of pension during the preceding year.

How pensioners arrange their financial affairs. Several resource persons indicated concern about how pensioners were able to manage their financial affairs--where they cashed their checks and how they paid for their room rent and meals. Tables 11-11, 11-12, and 11-13 provide data concerning these questions.

More than one-half of all Skid Row men who were on public welfare did not handle money, but got disbursing orders instead. This arrangement is made whenever it is believed that the man cannot be trusted with cash, because of his drinking habits or for other reasons. Of the pensioners who did get checks, more than one-third made use of the currency exchange for check-cashing. Only 5 to 7 percent of all checks were cashed at a bank. The rest were cashed at hotels,

Table 11-9: Pension Status by Percent of Income Derived from Pensions: Chicago Skid Row, 1957

Percent of Income Derived from Pensions	Total All Skid Row Men	Total all Skid Row Pensioners	Pension Status			
			Not a Pensioner	Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0
Zero percent . . . . .	53.8	4.1	98.9	5.2	1.4	6.0
1 - 9 percent . . . . .	5.0	10.2	...	8.6	1.4	24.8
10 - 19 percent . . . . .	5.6	12.1	...	5.2	7.2	29.5
20 - 29 percent . . . . .	2.2	4.8	...	3.4	6.8	4.0
30 - 39 percent . . . . .	2.6	5.6	...	3.9	2.4	12.8
40 - 49 percent . . . . .	1.8	3.9	...	...	4.3	9.4
50 - 59 percent . . . . .	1.4	3.1	...	2.6	4.3	2.0
60 - 69 percent . . . . .	1.4	3.1	...	1.3	7.2	...
70 - 79 percent . . . . .	1.0	2.2	...	1.3	2.4	3.4
80 - 89 percent . . . . .	1.9	4.1	...	6.5	2.9	2.0
90 - 99 percent . . . . .	2.8	6.1	...	14.2	...	2.0
100 percent . . . . .	18.7	40.3	...	46.6	59.4	4.0
No information re: income sources . . . . .	1.7	0.5	1.9	1.3	...	...
Horizontal percent distribution*. . . . .	100.0	46.5	52.9	18.3	16.4	11.8

\*Includes 0.6 percent for whom no information concerning pension status was available.

Table 11-10: Pension Status by Total Months Received Pension: Chicago Skid Row, 1957

Total months received pension	Total all Skid Row Pensioners	Pension Status		
		Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0
Less than 2 months . . . . .	10.0	12.9	...	19.5
Less than 4 months . . . . .	13.6	9.9	4.3	32.2
Less than 6 months . . . . .	9.9	5.2	2.9	26.8
Less than 8 months . . . . .	3.9	1.3	1.4	11.4
Less than 9 months . . . . .	1.0	1.3	...	2.0
Less than 10 months . . . . .	0.5	...	...	2.0
Less than 11 months . . . . .	2.0	2.6	1.4	2.0
Less than 12 months . . . . .	...	...	...	...
One full year . . . . .	54.1	58.2	88.4	...
No information: re: number of months . . . . .	4.9	8.6	1.4	4.0

Table 11-11: Places Where Pension Checks Were Usually Cashed by Homeless Men:  
Chicago Skid Row, 1957

Places Where Pension Checks Usually Cashed	Total all Skid Row Pensioners	Pension Status		
		Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0
At a bank . . . . .	5.4	5.2	7.2	3.4
At a hotel . . . . .	13.3	9.1	18.8	12.1
At a restaurant . . . . .	8.0	6.0	13.0	4.0
At a bar . . . . .	5.3	...	10.1	6.7
At a mission . . . . .	1.0	...	2.9	...
At a currency exchange . . . . .	25.7	8.6	35.3	38.9
Gets a Disbursing Order or direct service . . . . .	21.9	54.3	1.4	...
No information concerning where check cashed . . . . .	19.4	16.8	11.1	34.9

Table 11-12: How Homeless Men Arrange for Room Rent: Chicago Skid Row, 1957

Arrangement for Room rent	Total all Skid Row Pensioners	Pension Status		
		Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0
Pay cash each day . . . . .	11.7	6.0	14.5	16.8
Pay for 2-3 days . . . . .	...	...	...	...
Pay for 4-6 days . . . . .	0.5	...	1.4	...
Pay a week in advance . . . . .	14.6	5.2	22.7	18.1
Pay more than a week, but less than a month . . . . .	6.5	1.3	3.9	18.1
Pay a month in advance . . . . .	27.2	20.3	46.4	11.4
Room is provided with job . . . . .	0.5	...	1.4	...
Receives disbursing order for rent, or in jail or hospital . . . . .	21.9	55.6	...	...
No information concerning how room rent arranged . . . . .	16.0	11.6	9.7	35.6

Table 11-13: How Homeless Men Arrange for Meals Per Month: Chicago Skid Row, 1957

Arrangement for Meals	Total all Skid Row Pensioners	Pension Status		
		Welfare Pensioner	Retirement Pensioner	Temporary Pensioner
Total . . . . .	100.0	100.0	100.0	100.0
Pay cash for each meal . . . . .	35.4	17.2	54.6	36.9
Buys meal ticket for one week . . . . .	9.7	5.2	15.9	8.1
Buys meal ticket for 2-3 weeks . . . . .	4.6	1.3	2.9	12.1
Buys meal ticket for one month or more . . . . .	11.1	10.3	13.0	9.4
Receives disbursing order for meals, or in jail or hospital . . . . .	21.9	54.3	1.4	...
No information concerning how meals arranged . . . . .	17.3	11.6	12.1	33.6

restaurants, or taverns. Among men who receive earned retirement pensions, about 10 percent of the checks are usually cashed at a tavern. Missions cash only a few checks for pensioners. The group of pensioners who receive unemployment compensation did not discuss their financial affairs very fully; more than one-third failed to answer questions about check-cashing and other financial matters.

Almost one-half of the earned retirement pensioners arrange for their rooms a full month in advance, and an additional one-fourth pay a week or more rent (but less than a month) in advance. Only about 15 percent of the pensioners pay for their room by the day.

Unfortunately, the questions concerning financial arrangements were not asked of men who were not pensioners, so that the financial arrangements of pensioners and non-pensioners cannot be compared.

Skid Row pensioners tend to be very independent about their meal arrangements. More than one-half of the earned retirement pensioners pay cash for each meal as they eat, rather than purchasing meal tickets or making boarding arrangements. About one-fourth of these pensioners purchase meal tickets for a week or more in advance, but only 13 percent arrange for their meals for a full month in advance. The men on welfare pensions who are not on disbursing orders have a similar pattern, while the men on unemployment compensation tend to plan ahead for their meals even less than the other two groups of pensioners.

#### CONCLUSION

The analysis of this chapter demonstrates conclusively that the Skid Row population of Chicago contains a very large number and percentage of pensioners who live here against their own wishes. There are two types of these "captive residents," (a) the earned retirement pensioners who are forced to live here because it is the only place they can "get by" on their meagre retirement pension from Social Security, and (b) the welfare pensioner, who is sent here by the Department of Welfare when he qualifies for General Public Assistance and is found not to have a family. It must not be concluded, however, that all of these men live in cubicle-type hotels. Many live in the dilapidated old buildings that line the side streets of Skid Row and have been converted to rooming houses. Some of these Skid Row pensioners--both those who are in cubicles and those who are in rooming houses--are out-patients from Cook County Hospital, as charity patients. It seems to be a very common arrangement to give a convalescent charity out-patient a bed in a cubicle hotel and a disbursing order for a Skid Row restaurant.

From the information available, it seems that a conscientious and quite successful effort has been made to keep undeserving drunks off General Public Assistance. It also appears that under the present set-up, unemployment compensation is combined with seasonal or intermittent steady employment to permit a large group of able-bodied men to spend prolonged periods drinking excessively without looking for work or being interested in working. The system of "rocking chair pay" undoubtedly is a very useful device for helping gandy dancers (only a fraction of whom spend the winters in Chicago's taverns) spread their income over a full year, but it may also operate to institutionalize



and give economic as well as sociological security to uncontrolled drinking, and thereby help create chronic alcoholics. Beyond any doubt, the group of men on Skid Row who are most addicted to heavy drinking are not the retired pensioners or the year-around residents who work in factories, stores, and at "spot jobs," but the gandy dancer, who earns large amounts of money "on the books," who is forced to come back to Chicago's Skid Row to collect his pay, who then blows the whole paycheck in a few days of drinking, and then must stand in mission soup lines and take "spot jobs" until he is shipped out again or (in the wintertime), until the next unemployment compensation check arrives. Conceivably, enlightened officials in railroad corporations might sit down with welfare workers and devise some new procedure for paying these men for the work they do, and altering the conditions under which benefits are paid for off-season slack work, in such a way that they would be less able to go on week-long "benders" with full economic security.

## CHAPTER 12

### MIGRATION AND RESIDENTIAL MOBILITY OF HOMELESS MEN ON SKID ROW

There is a mistaken notion that Skid Row residents are highly mobile, and float from one city to another at frequent intervals. In fact, the Skid Row homeless man has been identified with the nomadic hobo. In his book The Hobo, Nels Anderson discusses Skid Row as a community of hoboes, ex-hoboes, and transient workers who spend their off seasons in the big city. In this book and others, Skid Row was widely advertised as a regional labor pool, from which industrialists throughout a large territory can draw to meet seasonal, extraordinary emergency, or cyclical peak needs. Gangs of workers for railroad maintenance, farm harvesting, logging and lumbering, highway and other construction in rural or remote areas, and cargo handling on trucking, steamship, and freight lines were said to be recruited from the Skid Rows of Chicago, Minneapolis, New York, Seattle, Los Angeles and other major cities. The facts presented in this chapter give clear evidence that although this may have been the situation before 1940, it certainly is not true now. Except for the "gandy dancer" and railroad commissary and freight yard worker (most of whom make one town their headquarters and return to it when a particular assignment is over), Skid Row is comprised of long-term residents who do not move about very much. In fact, in Chicago the vast majority of residents are legal residents of the state, and a substantial percentage are native born Chicagoans.

#### MOVEMENT BETWEEN CHICAGO AND OTHER AREAS.

In Chapter 2 it was shown that about 70 percent of Skid Row residents had remained in Chicago continuously during the 12 months prior to their interview, and that only 30 percent had resided outside Chicago at any time during the preceding year. When one remembers that about 16 percent of the Skid Row men had shipped out for temporary railway maintenance jobs and then returned, and that under normal circumstances one could expect an additional 10-15 percent of the men who live on Skid Row to be in-migrants who have come to seek permanent jobs in Chicago with the intent of settling down for an indefinite stay if they are successful, it becomes clear that the typical present-day homeless man on Skid Row is not the nomadic type. As an acknowledged "port of entry" for incoming migrants seeking to establish themselves in Chicago, the Skid Row may be expected to have a substantial percentage of newcomers. Hence, although a migration rate for one year of 30 percent is roughly 5 or 6 times the national average, it does not necessarily denote massive amounts of wandering or floating. Undoubtedly the wanderers and floaters that do exist make use of Skid Rows, but today they are only a minor segment of the Skid Row population.

Table 12-1 provides more detailed information about this comparative immobility. Only about 5 percent of the men interviewed had spent less than 10 weeks in Chicago during the preceding year; the remaining 95 percent had been there for a period of 2 $\frac{1}{2}$  months or more. In the Skid Row areas off West Madison Street, 98 percent of

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<sup>1</sup>It must be remembered that the interviews were taken in the winter, and that mobility was at the year's low ebb at this time. Some floaters may have gone South for the winter, while others may have returned to small towns because they could not afford to stay all winter in Chicago. Nevertheless, if the nomadic view of Skid Row were valid, proportions of this magnitude would be impossible at any season of the year.

Table 12-1: Total Number of Weeks Spent in Chicago by Homeless Men During the Preceding Year: Chicago Skid Row, Winter, 1957.

Total Number of Weeks Spent Chicago	Total	Areas		Residences			
		West Madison	All Other Areas	Cubicle Hotels	Hotels with Rooms	Missions	Other
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
0-4 weeks . . .	2.9	3.7	1.1	2.9	1.1	4.3	10.7
5-9 weeks . . .	2.5	3.0	1.1	2.6	1.1	4.3	3.6
10-14 weeks . . .	3.4	4.1	1.6	3.1	1.1	12.8	3.6
15-19 weeks . . .	1.7	2.4	...	2.1	...	4.3	...
20-24 weeks . . .	2.9	3.3	1.6	3.8	...	4.3	...
25-29 weeks . . .	4.3	5.5	1.4	5.5	...	8.5	...
30-34 weeks . . .	3.9	4.1	3.5	4.2	...	10.6	7.1
35-39 weeks . . .	2.1	2.7	0.5	1.6	1.1	4.3	10.7
40-44 weeks . . .	3.5	4.8	...	4.5	2.2	...	...
45-51 weeks . . .	2.3	2.7	1.4	2.6	1.1	2.1	3.6
52 weeks . . .	70.5	63.8	87.7	67.2	92.3	44.7	60.7

the men had been in Chicago 10 weeks or more. Residents of cubicle hotels had been much more inclined to be mobile than were residents of hotels with single rooms. In fact, the residents of Skid Row hotels with single rooms have a migration rate that is almost as low as that of the general population. But even in the cubicle hotels, about 94 percent of the men had spent 10 weeks or more in Chicago during the year preceding the interviews.

The only predominantly mobile groups shown in table 12-1 are the men who were found living in missions or sampled from mission soup lines, and also the "other" group, which consisted of men sleeping out, men in jail, etc. (This last group is mixed, because it also contains men in the hospital, who are largely elderly pensioners who have resided continuously in the State for two years or more.) It is these groups, which are comparatively small in comparison with the total Skid Row population, which welfare workers most often encounter, and this probably is one reason why there may have been a tendency to overestimate the mobility of Skid Row residents.

Not only are the Skid Row men comparatively less mobile than they have been thought to be, but when they do leave Chicago they do not usually travel very far. Table 12-2 verifies this by showing the geographic regions the men had visited who had lived outside Chicago at some time during the year preceding their interviews.<sup>2</sup> Almost one-half of all regional visits were made to the states of the East North Central division, and about one-fourth were made to the states of the West North Central division. Apparently there is comparatively little circulation between Chicago's Skid Row and the Atlantic Seaboard, the Pacific Coast, or the Mountain divisions. Much of the contact that is reported for these divisions and with the South undoubtedly is due to in-migrants arriving for a permanent or a semi-permanent stay.

When Skid Row men leave Chicago, do they head directly for another city with a Skid Row? Table 12-3 lists 20 metropolitan cities thought to have substantial Skid Rows, and shows the percentage of all visits during the year made by homeless men that had included a stop in each city. More than one-half of all trips had included stops in cities other than those on the list. Since the statistics include the trip to Chicago of in-migrants and the trips of seasonal workers to the site of their work, this large proportion of trips to or from places not on the list of cities need not be surprising. A disproportionately large share of trips were made between Chicago and:

Minneapolis  
 Detroit  
 St. Louis  
 New York City  
 Los Angeles  
 Milwaukee

These are all cities with major Skid Rows. But they are also either large nearby cities that could be expected to have an unusual attraction for all of Chicago's residents, or areas that are attracting migrants from the entire nation. Thus,

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<sup>2</sup>The sum of the percentages for the various regions does not add to the total percentage mobile because each region visited was counted, and some men visited two or more regions.

Table 12-2: Geographic Regions Visited by Homeless Men During the Preceding Year:  
Chicago Skid Row, Winter, 1957.

Geographic Regions Visited	Total	Areas		Residences			
		West Madison	All Other Areas	Cubicle Hotels	Hotels with Rooms	Missions	Other
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Immobile, remained in Chicago all year .	70.5	63.8	87.7	67.2	92.3	44.7	60.7
Mobile, total . . . . .	29.5	36.2	12.3	32.8	7.7	55.3	39.3
New England States.	...	...	...	...	...	...	...
Middle Atlantic States . . . . .	2.6	3.4	0.5	3.6	...	...	3.6
East North Central States . . . . .	17.0	20.8	6.5	18.9	3.3	36.2	17.9
West North Central States . . . . .	7.1	8.5	3.0	7.5	1.1	14.9	14.3
South Atlantic States . . . . .	2.6	3.4	0.5	2.3	...	10.6	7.1
East South Central States . . . . .	2.2	3.0	...	2.1	...	10.6	...
West South Central States . . . . .	2.4	2.6	1.9	2.2	2.2	4.3	3.6
Mountain States . . . . .	2.4	2.8	1.4	2.6	2.2	2.1	...
Pacific States . . . . .	3.2	3.5	2.2	3.3	...	4.3	14.3

Table 12-3: Cities Visited During the Preceding Year by Residents of Chicago Skid Row Who Had Resided Outside Chicago at Some Time During the Previous Year: Winter, 1957.

City	Percent of All Places Visited by Mobile Men
Total . . . . .	<u>100.0</u>
Baltimore . . . . .	1.7
Boston . . . . .	...
Buffalo . . . . .	2.3
Cleveland . . . . .	2.0
Denver . . . . .	1.7
Detroit . . . . .	6.1
Fort Worth . . . . .	0.6
Houston . . . . .	0.9
Indianapolis . . . . .	0.9
Kansas City . . . . .	1.7
Los Angeles . . . . .	4.0
Miami . . . . .	1.2
Milwaukee . . . . .	4.0
Minneapolis . . . . .	6.1
New York . . . . .	5.2
Omaha . . . . .	0.9
Portland . . . . .	1.4
St. Louis . . . . .	4.9
Seattle . . . . .	1.4
Toledo . . . . .	0.6
None of the above cities . . . . .	52.4

there seems to be little evidence that such migration as does occur is extremely concentrated between a few major Skid Rows. Instead, it is predominantly a departure from Skid Row to some remote point away from a major Skid Row, followed by a return. This pattern is created largely by "gandy dancers," who comprise a very large share of the mobile population.

#### MOVEMENT BETWEEN SKID ROW AND OTHER TYPES OF RESIDENCES

Do homeless men live continuously on Skid Row, or do many of them come to Skid Row only for short periods when they are broke, when they want to go on a spree, or visit for other short-term reasons? Exact statistics concerning the rate of circulation between Skid Row and other residential areas are not available, but indirect information is available from table 12-4. This table shows the number of different addresses off Skid Row (either inside Chicago or outside) that the men reported they had lived during the preceding year. More than 40 percent of the men on Skid Row had lived off Skid Row during the year. This may include residence in other neighborhoods before coming to live on Skid Row, leaving Skid Row to live in a labor camp, or moving out of Skid Row areas during times of steady employment and returning only when the job ended. Table 12-4 also shows that movement between Skid Row residences and other types of residences is much greater for men who live off West Madison street than for those who live on West Madison, and much greater for men who live in hotels with single rooms than for men who live in cubicles, who were found in missions, in jails and hospitals, or sleeping out.

Unfortunately, there is no way to determine, from the sample for this study, the number of men who leave Skid Row each year. However, the fact that the total in-mobility rate from all sources (in-migration from non-Skid Row areas in other communities and in-movement from other neighborhoods of the city) is about 40 percent, and that the total Skid Row population appears to be roughly constant in size or growing only slowly, suggests that the rate of out-migration each year is also about 40 percent. Thus, for each 10 men one encounters on Skid Row, 6 have been on a Skid Row continuously throughout the year, and 4 are either newcomers or men who have lived a part of the year away. And for each set of 10 men there are 4 men who have drifted out of Skid Row areas to other parts of the city or to other cities. Some of these men will return from work camps, other Skid Rows, or from small towns where they are visiting, and some will never return because they have climbed permanently off Skid Row into more desirable neighborhoods.

#### SUMMARY

The view of Skid Row as a regional pool of migratory labor and vagabond hoboos should be replaced with the following conclusion: Skid Rows are populated predominantly by men who may move around a great deal locally, but who move from one city to another only when forced by necessity--unemployment, trouble with police, or to take a temporary job with the expectation of returning. To the average Skid Row man, going to another city is not a routine adventure or the product of a capricious whim. It is an out-migration caused either by duress or by temporary work opportunities. It would be a mistake to view Chicago's Skid Row as a deposit of "human dross" collected entirely from other communities and for which Chicago should not be held responsible. A major percentage of the men on Skid Row are

Table 12-4: Number of Addresses Off Skid Row at Which Homeless Men Had Lived During the Preceding Year: Chicago Skid Row, Winter, 1957.

Number of Addresses Off Skid Row	Total	Areas		Residences			
		West Madison	All Other Areas	Cubicle Hotels	Hotels with Rooms	Missions	Other
Total . . . . .	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
None . . . . .	59.3	64.0	47.3	62.7	47.2	60.9	60.0
1 address . . . . .	23.9	22.4	27.5	23.2	29.1	17.4	20.0
2 addresses . . . . .	9.7	7.5	15.2	8.7	11.8	8.7	16.0
3 addresses . . . . .	5.8	4.8	8.3	4.3	10.6	8.7	...
4 addresses . . . . .	1.0	1.0	0.8	0.4	1.2	4.3	4.0
5 addresses . . . . .	0.2	0.3	...	0.4	...	...	...
6 addresses . . . . .	0.2	...	0.8	0.4	...	...	...



legal citizens of the state, registered voters, and a product of life in Chicago. In the interviews with the men, respondents were heard to declare over and over, "I know everybody on this street, and everybody knows me." Workers at the Monroe Street Police Station, in the missions, and in the welfare stations verified that this is true. Strangers on Skid Row are detected immediately not simply because they may not dress and act like the rest, but principally because theirs is a strange face among familiar acquaintances. Over the course of a lifetime, the average Skid Row man visits several cities, and appears to have traveled much. But the interval between trips tends to be quite long, and moves are associated with loss of jobs or other hardships. There appears to be a considerable volume of movement between Skid Row areas and other residential neighborhoods. Probably most of this represents the sliding-down to a situation where they are forced to live on Skid Row (due to old age, loss of health, or progressive deterioration due to heavy drinking), or the climbing up of poor but industrious fresh immigrants who are forced to live on Skid Row temporarily while they find employment and save a little money. Once a man has become a long-term resident of Skid Row, the probabilities of his leaving become much diminished.

Another major source of turnover in Skid Row personnel is death. The high death rates, described in Chapter 7, cause old-timers to disappear at a substantial rate, and they are replaced by newcomers who will stay many months or years until they die in turn. This simple process of high mortality with continuous replacement can contribute to the illusion of a high rate of migration.

## CHAPTER 13

### WHAT ALREADY IS BEING DONE FOR HOMELESS MEN IN CHICAGO

By assembling data from the several organizations that assist Skid Row men, and by making conservative estimates where data cannot be assembled directly, this chapter arrives at the finding that a grand total of \$463,550 is being expended each month (\$5,562,600 per year) in assisting or supporting homeless men in Chicago. The following pages describe the nature of this support and the sources from which it comes. It is estimated that slightly more than three-fourths of this very large expenditure is devoted to meeting the day-to-day needs of the men or to police, legal, or administrative expenses that have no long-run effect in diminishing the size of Skid Row or rehabilitating any Skid Row resident. The City of Chicago lags far behind the private agencies in rehabilitation or remedial efforts, despite the fact that it pays a grand total of not less than \$4,719,948 per year into the Skid Row areas for police, municipal courts, welfare, medical care, inspections, etc., in excess of what would be necessary if this were a "normal" residential area; less than two per cent of this is going toward trying to salvage the men, to cause the size of the area to decrease, or to diminish the magnitude of the problem.

The problem of the homeless man and of Skid Row is not a new one for Chicago, and there have been persons and agencies trying to "do something about it" since the first emergence of the problem. For more than three-quarters of a century, both public and private agencies have shown an awareness of the problem of the "down-and-outers" who have accumulated at the heart of the city since the days of the sawmills and first railroads. At periodic intervals there have been special investigations, which generally have been followed by a major forward step in improving the condition of the residents of Skid Row areas. Inasmuch as one of the principal goals of the present research is to presage another such forward stride, with special emphasis upon land clearance, rehousing, and a long-run and enduring shrinkage of the problem, it is important to take an inventory of what already is being done in behalf of these men. With such an inventory, it is possible to map out what would be an "ideal" program, to compare the present program with the ideal, and, finally, to make plans for progress toward the ideal program, keeping in mind items of budget, needs of competing programs, and the present state of knowledge about how to remedy each of the problems. The present chapter is an inventory of what is now being done in Chicago.

There are in Chicago no less than thirty-nine different agencies that have activities or programs designed to lend aid or otherwise to deal with the problem of homeless men on Skid Row. In the following pages each of these agencies is listed, and the work of each is described in specific detail. Table 13-1 presents statistical data about the operation of these agencies. Following these agency-by-agency descriptions is a statement that tries to pull together the entire body of activities into a single coherent picture. It is suggested that the reader first look over Table 13-1 rather carefully, then read the description of the work of each of the various agencies (referring back to Table 13-1 as he goes), before reading the final summary section.

The statistics reported in Table 13-1 were submitted by the agencies themselves. A description of the program of each agency was prepared by the study director and submitted to the agency for its approval. In all cases the recommended changes suggested by the agencies were incorporated in the statements that appear in this chapter. Lest the agencies be accused of immodesty, it should be pointed out that terms of comparison or praise such as "largest," "comprehensive," used in describing the activities of some of these organizations were inserted by NORC and not by the agencies. Where the agencies did not understand the full scope of the inquiry and hence did not report fully their activities with respect to the Skid Row problem, notes have been added by NORC. In such cases the appended notes were not returned to the agencies for a second review, but all such notes are identified.

Table 1-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 1 of 4 parts)

Type of Service	T O T A L			A G E N C I E S			
	All Chicago Agencies	Public Agencies	Private Agencies	Alcoholics Anonymous (Private)	Board of Health of Chicago (Public)	Cathedral Shelter (Private)	Catholic Charities (Private)
Number of meals given without charge:							
To "walk in" from street . . . . .	68,656	90	68,566	...	...	4,015	9,000
To residents in rehabilitation program . . . . .	373,854	328,680	45,174	...	...	540	1,950
Number of man-nights lodging--no charge:							
Temporary (1-3 nights only) . . .	14,758	...	14,758	...	...	1,047	2,250
More Permanent . . .	125,778	109,560	16,218	...	...	180	...
Number of men counseled:							
Alcoholism . . . . .	{ 16,472	{ 1,882	{ 14,590	600	...	{ 1,113	1,350
Economic, medical & welfare problems .				...	...		1,400
Religious, spiritual problems . . . . .				...	...		2,440
Attendance at religious services:							
"Walk in" from street	52,644	...	52,644	...	...	a/	6,000
Residents--men in program . . . . .	9,940	...	9,940	...	...	a/	1,350
Clothing given away (equivalent to full set of clothing) . .	5,674	...	5,674	a/	...	430	2,490

(continued)

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 1 of 4 parts)

Type of Service	T O T A L			A G E N C I E S			
	All Chicago Agencies	Public Agencies	Private Agencies	Alcoholics Anonymous (Private)	Board of Health of Chicago (Public)	Cathedral Shelter (Private)	Catholic Charities (Private)
Medical treatment given (Number of men) . . .	2,852	1,257	1,595	...	...	a/	1,140
First aid treatment given (number of men) .	924	400	524	...	...	a/	25
Dental treatment given (Number of men) . . .	72	...	72	...	...	a/	10
Jobs arranged for men: Temporary (no. jobs) Permanent (no. jobs)	{ 6,959	{ 5,336	{ 1,623	{ 88	... ...	45 ...	240 90
Recreation--no. men . .	31,676	30,057	1,619	...	...	...	300
Total man-months devoted to homeless men	443	244	199	30 <sup>b/</sup>	2	10	7
Number of professional or administrative man-months devoted to homeless men . . . . .	135	73	62	...	...	4	8

a/ This service is rendered when indicated, but is on an individual basis and has not been estimated.  
b/ Rough estimate by N.O.R.C. staff for purposes of arriving at a total, actual amount is probably larger than indicated. Where agency cares for other persons, an effort has been made to estimate the proportion of its effort devoted to the care of Skid Row men.

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 2 of 4 parts)

Type of Service	A G E N C I E S							
	Chicago Alcoholic Treatment Center (Public)	Chicago Christian Industrial League (Private)	Chicago Committee on Alcoholism (Private)	Chicago Dept. of Buildings (Public)	Chicago Dept. of Fire Prevention (Public)	Chicago Gospel Mission (Private)	Chicago United Mission (Private)	Cook County Dept. of Welfare (Public)
Number of meals given without charge:								
To "walk in" from street . . . . .	...	8,124	...	...	...	3,133	5,000	...
To residents in rehabilitation program . . . . .	630 <sup>b/</sup>	8,119	...	...	...	...	500	322,200
Number of man-nights lodging--no charge:								
Temporary (1-3 nights only) . . .	...	3,749	...	...	...	320	2,100	...
More permanent . . .	210	2,400	...	...	...	...	...	107,400
Number of men counseled:								
Alcoholism . . . . .	7 <sup>b/</sup>	} 950 <sup>b/</sup>	2 <sup>b/</sup>	...	...	90	150	90
Economic, medical & welfare problems .	7 <sup>b/</sup>		...	...	...	...	...	1,000
Religious, spiritual problems . . . . .	...		...	...	...	95	210	...
Attendance at religious services:								
"Walk in" from street Residents--men in program . . . . .	...	12,500	...	...	...	3,300	4,500	...
Residents--men in program . . . . .	...	600	...	...	...	...	540	...
Clothing given away (equivalent to full set of clothing) . .	...	500	...	...	...	250	168	a/

(continued)

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 2 of 4 parts)

Type of Service	A G E N C I E S							
	Chicago Alcoholic Treatment Center (Public)	Chicago Christian Industrial League (Private)	Chicago Committee on Alcoholism (Private)	Chicago Dept. of Buildings (Public)	Chicago Dept. of Fire Prevention (Public)	Chicago Gospel Mission (Private)	Chicago United Mission (Private)	Cook County Dept. of Welfare (Public)
Medical treatment given (number of men) . . .	7 <sup>b/</sup>	52	2 <sup>b/</sup>	...	...	...	...	a/
First aid treatment given (number of men) .	...	40	...	...	...	10	...	...
Dental treatment given (number of men) . . .	...	5	...	...	...	...	...	a/
Jobs arranged for men:								
Temporary (no. jobs)	a/	100	...	...	...	5	a/	{ 90
Permanent (no. jobs)	a/	40	...	...	...	...	a/	
Recreation--no. men . .	7 <sup>b/</sup>	95	...	...	...	...	...	...
Total man-months devoted to homeless men	5 <sup>b/</sup>	12	a/	1 <sup>b/</sup>	8	1	3	30
Number of professional or administrative man-months devoted to homeless men . . . . .	4 <sup>b/</sup>	9	a/	...	...	...	1	30

a/ This service is rendered when indicated, but is on an individual basis and has not been estimated.  
b/ Rough estimate by N.O.R.C. staff for purposes of arriving at a total, actual amount is probably larger than indicated. Where agency cares for other persons, an effort has been made to estimate the proportion of its effort devoted to the care of Skid Row men.

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 3 of 4 parts)

Type of Service	A G E N C I E S								
	Cook County Hospital (Public)	Illinois State Employment Service (Public)	Indian Work--St. Timothy Church (Private)	Lutheran Home Rescue Mission (Private)	Monroe Street Court (Public)	Municipal Court--Social Services (Public)	Oak Forest Hospital (Public)	Olive Branch Mission (Private)	Pacific Garden Mission (Private)
Number of meals given without charge:									
To "walk in" from street . . . . .	...	...	40	...	...	90	...	2,250	9,486
To residents in rehabilitation program . . . . .	1,350 <sup>b/</sup>	...	...	...	...	...	4,500 <sup>b/</sup>	728	3,471
Number of man-nights lodging--no charge:									
Temporary (1-3 nights only) . . .	...	...	25	a/	...	...	...	126	3,221
More permanent . . .	450	...	...	...	...	...	1,500	288	1,200
Number of men counseled:									
Alcoholism . . . . .	75 <sup>b/</sup>	...	...	...	...	...	50 <sup>b/</sup>	} 210 <sup>b/</sup>	1,200
Economic, medical & welfare problems .	100 <sup>b/</sup>	...	25	...	...	503	50 <sup>b/</sup>		1,000
Religious, spiritual problems . . . . .	...	...	25	a/	...	...	...		1,500
Attendance at religious services:									
"Walk in" from street	...	...	65	15 <sup>b/</sup>	...	...	...	a/	12,000
Residents--men in program . . . . .	...	...	...	...	...	...	...	256 <sup>b/</sup>	1,200
Clothing given away (equivalent to full set of clothing) . .	...	...	25	35 <sup>b/</sup>	...	...	...	232	600

(continued)



Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 3 of 4 parts)

Type of Service	A G E N C I E S								
	Cook County Hospital (Public)	Illinois State Employment Service (Public)	Indian Work--St. Timothy Church (Private)	Lutheran Home Rescue Mission (Private)	Monroe Street Court (Public)	Municipal Court-- Social Services (Public)	Oak Forest Hospital (Public)	Olive Branch Mission (Private)	Pacific Garden Mission (Private)
Medical treatment given (number of men) . . .	1,200 <sup>b/</sup>	...	...	...	...	...	50	...	200
First aid treatment given (number of men) .	200 <sup>b/</sup>	...	...	...	...	...	...	<u>a/</u>	40
Dental treatment given (number of men) . . .	<u>a/</u>	...	...	...	...	...	...	...	50
Jobs arranged for men: Temporary (no. jobs)	...	4,650	...	...	...	146	<u>a/</u>	<u>a/</u>	100
Permanent (no. jobs)	...	150	...	...	...	...	<u>a/</u>	<u>a/</u>	30
Recreation--no. men . .	...	...	...	...	...	...	50 <sup>b/</sup>	...	80
Total man-months devoted to homeless men	32 <sup>b/</sup>	5	1	...	10	1	16 <sup>b/</sup>	10	20
Number of professional or administrative man- months devoted to home- less men . . . . .	16 <sup>b/</sup>	1	1	...	10	1	10 <sup>b/</sup>	1	5

<sup>a/</sup> This service is rendered when indicated, but is on an individual basis and has not been estimated.

<sup>b/</sup> Rough estimate by N.O.R.C. staff for purposes of arriving at a total, actual amount is probably larger than indicated. Where agency cares for other persons, an effort has been made to estimate the proportion of its effort devoted to the care of Skid Row men.

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 4 of 4 parts)

Type of Service	A G E N C I E S							
	Peter Maurin House (Private)	Police Department (Public)	Reading Room (Public)	St. Leonard's House (Private)	Salvation Army-- Harbor Light (Private)	Salvation Army-- Men's Soc'l Service (Private)	Sunshine Gospel Mission (Private)	Traveler's Aid Society (Private)
Number of meals given without charge:								
To "walk in" from street . . . . .	13,750	...	...	20	11,448	...	2,300	a/
To residents in rehabilitation program . . . . .	1,850	...	...	900 <sup>b/</sup>	3,123	22,643	1,350	a/
Number of man-nights lodging--no charge:								
Temporary (1-3 nights only) . . . .	...	...	...	...	1,700	...	220	a/
More permanent . . . .	510	...	...	300 <sup>b/</sup>	5,400	5,940	...	...
Number of men counseled:								
Alcoholism . . . . .	25	...	...	6	576	116	325	...
Economic, medical & welfare problems . . . .	30	...	...	20	322	40	25	124
Religious, spiritual problems . . . . .	25	...	...	26	160	85	325	...
Attendance at religious services:								
"Walk in" from street . . . . .	...	...	...	...	11,264	...	3,000	...
Residents--men in program . . . . .	...	...	...	...	4,477	1,517	...	...
Clothing given away (equivalent to full set of clothing) . . . . .	410	...	...	a/	84	400	50	...

(continued)

Table 13-1: Inventory of Services Rendered to Skid Row Men by Public and Private Agencies During a Typical Current Month, Chicago, 1959. (Part 4 of 4 parts)

Type of Service	A G E N C I E S							
	Peter Maurin House (Private)	Police Department (Public)	Reading Room (Public)	St. Leonard's House (Private)	Salvation Army-- Harbor Light (Private)	Salvation Army-- Men's Soc'l Service (Private)	Sunshine Gospel Mission (Private)	Traveler's Aid Society (Private)
Medical treatment given (number of men) . . .	10	...	...	...	146	45	...	<u>a/</u>
First aid treatment given (number of men) . . .	20	...	200	...	369	20	...	<u>a/</u>
Dental treatment given (number of men) . . .	2	...	...	...	5	...	...	...
Jobs arranged for men:								
Temporary (no. jobs)	10	...	300	60	776	<u>a/</u>	...	<u>a/</u>
Permanent (no. jobs)	...	...	...	2	37	<u>a/</u>	...	...
Recreation--no. men . . .	510	...	30,000 <sup>b/</sup>	...	434	200	...	...
Total man-months devoted to homeless men	2	139	3	5	73	20	3	2
Number of professional or administrative man-months devoted to homeless men . . . . .	...	...	1	1	17	12	1	2

<sup>a/</sup> This service is rendered when indicated, but is on an individual basis and has not been estimated.

<sup>b/</sup> Rough estimate by N.O.R.C. staff for purposes of arriving at a total, actual amount is probably larger than indicated. Where agency cares for other persons, an effort has been made to estimate the proportion of its effort devoted to the care of Skid Row men.

ALCOHOLICS ANONYMOUS  
205 West Wacker Drive

Program. The Alcoholics Anonymous program is widely respected by workers of many different agencies, both public and private, and by workers in many different religious faiths. It appears to be able to help many of the Skid Row alcoholics, and is especially useful in helping men "stay dry" after they have come from a mission or other program for alcoholic treatment. Alcoholics Anonymous has organized several groups on Skid Row or on the fringes of Skid Row, so that its services are widely available to men who want to take advantage of them. The Monroe Street Station, the Alcoholic Treatment Center, the Salvation Army, and Catholic Charities are among those who combine AA activities with their own rehabilitation programs.

The agency reports that there is no possible means of estimating accurately the time spent in behalf of Skid Row alcoholics. It reports, "No records are kept of the endless hours spent by individuals and groups, all of them anonymous."

BOARD OF HEALTH OF CHICAGO  
54 West Hubbard Street  
Herman N. Bundesen, M.D., President

Program. Enforces the food ordinances in establishments serving food and drink on Skid Row. After a major cleanup of Skid Row in 1950 (at which time several establishments were closed because of chronic insanitary conditions), the restaurants and taverns of Skid Row were subjected to a special quarterly inspection. It was discovered that even a period of three months was too long a time between inspections and that such establishments would become careless unless inspected more frequently. At the present time Skid Row restaurants and taverns are given special monthly inspections. If an establishment fails inspection, it is closed until a reinspection indicates that it is in compliance with the requirements of the Municipal Code of Chicago. The Board of Health also enforces in the Skid Row area the ordinance requiring compulsory chest x-rays for food handlers in eating and drinking establishments in the city.

Personnel. Equivalent of one city inspector, full-time.

CATHEDRAL SHELTER  
207 South Ashland Boulevard  
The Rev. Joseph F. Higgins, Director

Program. The Cathedral Shelter, a casework agency, is under the auspices of the Episcopal Church. Men are interviewed by casework supervisor and two counselors, who advise them, and when necessary, refer them to other public or private agencies. Meal tickets are issued on various restaurants in the area. Bed tickets are given on neighborhood hotels in the Skid Row area (not all cubicle type) and to the Wabash "Y" Hotel. Clothing is distributed by ticket arrangement from the used clothing department. Jobs are obtained through Illinois Employment Service and from private parties.

Referrals come from most of the city and suburban agencies, both public and private, as well as from private and church sources and hospitals. Care

provided is determined, as far as possible, on a casework basis. Occasionally money is loaned to non-resident families until first payday. The agency often corresponds with relatives and friends.

In September, 1958, Halfway House, to assist in the rehabilitation of alcoholics, was opened. This unit, on the premises of the Cathedral Shelter, houses six men, most of whom have completed intensive treatment at the Chicago Alcoholic Treatment Center. Admittance to the House is on a casework basis. The House is self-governed and self-supported.

This organization is one of the principal resources in Chicago for emergency aid when a man is in desperate circumstances. Also provides aid for men released from prison or local jails, to help them to get started again.

Personnel. Director  
 Casework supervisor  
 Counselors (2)  
 Receptionist  
 Assistant bookkeeper and treasurer  
 Secretary  
 Manager of Halfway House  
 Building manager  
 Maintenance man,

CATHOLIC CHARITIES OF CHICAGO  
 126 North Desplaines Street  
 The Rt. Rev. Msgr. Vincent W. Cooke

Program. Has a very extensive program of aid to homeless men from Skid Row. Issues bed tickets to men who have emergency needs. Assists men to find jobs. Has no dormitory of its own but also refers men to four local hotels. Skid Row men are free to avail themselves of shower and toilet facilities at the Center to clean up. Three counselors work full-time counseling men with problems of alcoholism; there are also two part-time counselors. There is an A.A. clubroom. Each week five or six men are recommended to the Illinois State Hospital at Manteno for treatment of alcoholism. A weekly visit is paid to these men in Manteno while they are undergoing treatment, and a representative is there to meet them when they are released. When a man is released, the Center has a job waiting, preferably at a place off Skid Row where room and board are offered as part of the job.

Personnel. Full-time counselors to work with alcoholics (3)  
 Part-time counselors to work with alcoholics (2)  
 Social workers, Manteno program (3)  
 Social workers, emergency needs for meals, beds (4)  
 Vocational placement, job assistance (4).

CHICAGO ALCOHOLIC TREATMENT CENTER  
 3026 South California Avenue  
 Arthur J. Ward, Executive Director

Program. Conducts a thirty-six-bed in-patient Center for treatment of chronic alcoholism for male persons, only on a volunteer-admission basis. This Center is operated by the City of Chicago under the guidance of the Mayor's Commission on Rehabilitation of Persons. The program is a multi-therapy approach, combining medicine, psychiatry, religion, recreation, Alcoholics Anonymous, education, and research. At present approximately twenty per cent of patients (seven patients) are Skid Row men. Expansion is now under way for thirty-six additional beds which will enlarge the Center's capacity to a total of 72.

Personnel. Director of Rehabilitation Center  
 Administrative Assistant II  
 Medical director  
 Physician  
 Resident physician  
 Psychiatrist (part-time)  
 Director of Psychiatric Social Service  
 Psychiatric social service workers (2)  
 Social service workers (2)  
 Senior psychologist  
 Psychologists (2)  
 Supervisor of nurses  
 Hospital nurses (5)  
 Practical nurses (3)  
 Physical instructor  
 Hospital expediter  
 Assistant cook  
 Janitor.

CHICAGO CHRISTIAN INDUSTRIAL LEAGUE  
 28 South Sangamon Street  
 The Rev. William Seath, Director

Program. One of the major private charitable organizations on Skid Row, devoted to providing food, shelter, religious training, and counseling to men who voluntarily come in from the street or are referred by other agencies. The Chicago Industrial League operates three facilities: mission activities, Dawes Center (a dormitory and hotel for men), and a rehabilitation program, all interrelated. (a) As a mission, gives food, clothing, and limited number of beds to needy recipients, holds services daily, and gives food after each noon service. A primary objective is to help men who are destitute. It provides food, beds, baths, fumigation, clothing, medical service, and free employment aid. (b) Dawes Center has capacity for 255 men in beds. Of these beds, approximately 120-125 are given away free each night, and the remainder are rented at the rate of twenty-five or fifty cents per bed. In wintertime, the lobby of Dawes Center is thrown open for overflow. Men can sit up in chairs to get out of the cold. Dawes Center also has a library, a free employment service (through facilities of the Christian Industrial League). As

a hotel, Dawes Center rents rooms to men at cheap rates (twenty-five or fifty cents a night). Also, it sub-rents a part of its hotel space to other missions, who give away bed tickets to deserving men. (c) As a rehabilitation center, it provides housing, meals, rehabilitation work for about eighty persons in the program. A staff doctor is available part-time for men in the program. Counselors try to assess physical as well as religious needs. They keep a case record on each man.

Personnel. Executive Director  
Associate directors (2)  
Counselors (5)  
Secretary to Executive Director  
Secretary to associate directors  
Executive Secretary, Woman's Auxiliary  
Physician (part-time).

CHICAGO COMMITTEE ON ALCOHOLISM  
116 South Michigan Avenue  
Arnold J. Kuhn, Ph.D., Executive Director

Program. A voluntary, not-for-profit organization devoted to educating the public and professional groups concerning the problems of alcoholism, and to experimentation with methods of treatment. As one of its activities it operates Portal House Clinic, an alcoholism out-patient treatment center. Patients are charged according to ability to pay, and no one is rejected for financial reasons. Since its facilities are not located in Skid Row and offer out-patient, long-term psychiatric care, comparatively few Skid Row alcoholics seek treatment here. However, the board of directors and staff of the Committee have long been interested in the problem of the alcoholic on Skid Row and have participated in discussion and plans for programs as advisers and consultants.

CHICAGO DEPARTMENT OF BUILDINGS  
320 North Clark Street  
George L. Ramsey, Commissioner

Program. Survey Inspectors of the Department of Buildings have been assigned each fall to make a thorough inspection of cubicle-type hotels and the larger rooming-houses in the Skid Row area, to ascertain any violations of the Building and Housing Codes. This inspection covers structural conditions, sanitation, fire hazards, and general maintenance.

Reinspections are made where violations exist, and where compliance is not forthcoming, the parties responsible are brought into court and fined.

Also, annual inspections are made of all theaters, churches, schools, and public-assembly units, and buildings over one story in height, with certain exceptions, to assure compliance with the code provisions.

Most of the cubicle-type hotels have installed sprinkler systems as an additional safety measure.

CHICAGO DEPARTMENT OF CITY PLANNING  
 Room 1006, City Hall  
 Ira J. Bach, Commissioner

Program. The following paragraph of the Municipal Code of Chicago (Chapter 7-1-3) establishes the powers and duties of the Department of City Planning:

"It shall be the duty of the commissioner of city planning to maintain and expand a comprehensive general plan of Chicago; to coordinate the planning of specific physical improvement projects; to keep the Chicago zoning ordinance under constant review and to recommend amendments as necessary to keep pace with changing conditions; to coordinate the development of a long range capital improvement program, and to this end the mayor shall appoint a committee made up of departmental officers, and representatives of any agency created by the city council, of which the commissioner shall act as chairman; to represent the city in its planning relationships with other governmental units in the Chicago metropolitan area; and to render necessary services, as requested, to the mayor, the city council and its committees."

All three of Chicago's Skid Rows, as the three most severely substandard residential areas in the city of Chicago, lie entirely within the scope of the new planning program for central areas currently being developed by the City Planning Commission. (Second paragraph added by NORC)

CHICAGO DEPARTMENT OF FIRE PREVENTION  
 City Hall  
 Robert J. O'Brien, Division Marshal

Program. In cooperation with the city's Building Department, has tried to lessen the danger of tragic flophouse fires, which were comparatively common until a few years ago. In 1955 the Department made a fire inspection of every cubicle-type hotel and every large rooming-house in the Skid Row areas and inspected the buildings for fire-fighting equipment, fire escapes, etc. (Since then, the annual inspection by the Building Department has continued this work.) A special inspector is assigned to make surprise inspections of slum buildings and to cite operators for violations of the fire code.

In addition to the above, five lieutenants now inspect all cubicle hotels in the daytime; also, there are now three lieutenants and police officers who visit these types of hotel during the night hours. Their main purpose is to see that all fire escapes, doors, fire-fighting appliances are in good working condition.

Fire stations in the West Madison Street vicinity are extraordinarily well-equipped and well-manned to handle major conflagrations.



CHICAGO GOSPEL MISSION  
 1125 West Madison Street  
 Russell Youngstrom, Superintendent

Program. A mission devoted to providing religious and material assistance to men on Skid Row. Located at the western edge of Skid Row area, holds nightly services for the men, followed by a meal. At each evening service, approximately ten bed tickets are given away to newcomers, to the Dawes Center or other hotel. Daytime contacts and counseling with men from the street who apply. Persons in need are given clothing, first-aid, and assistance in finding jobs. (Statement prepared at NORC, not reviewed by agency)

CHICAGO HOUSING AUTHORITY  
 608 South Dearborn Street  
 Alvin E. Rose, Executive Director

Program. No program for homeless men. Public housing is intended primarily to accommodate low-income families, but recent changes in Public Housing Law permit admittance of single persons. In Chicago, preference is given to couples, but after this demand has been satisfied, any remaining small units are available to single women fifty-five years of age or over in city-state-financed developments, and sixty-five years of age or over in federally-aided developments. In Chicago, single men are not admitted, even if elderly, but if an elderly couple occupy a CHA dwelling and the wife dies, the husband is permitted to continue occupancy of the dwelling should he so desire.

CHICAGO LAND CLEARANCE COMMISSION  
 320 North Clark Street, Room 516  
 Phil A. Doyle, Executive Director

Program. The Illinois Blighted Areas Redevelopment Act of 1947 authorizes the Commission to designate as project areas, subject to the approvals noted below, (1) built-up areas characterized by dilapidation, obsolescence, overcrowding, lack of sanitary facilities, or other factors detrimental to the public welfare, and (2) vacant or predominantly open land that is characterized by clouded titles, great diversity of ownership, and excessive tax delinquency. Within such designated project areas, the Commission has the following general powers: (1) acquisition by purchase, gift, or exercise of the power of condemnation; (2) relocation of resident families; (3) demolition of existing structures; (4) installation of site improvements, such as streets, sidewalks, sewers, and water mains, in preparation for redevelopment; and (5) sale of land at use value to redevelopers for the construction of residential, industrial, or commercial structures and supporting facilities, as specified in an approved redevelopment plan.

Skid Row is prominently and perennially proposed for clearance. When this program reaches the action stage, the task of clearance would fall upon the Chicago Land Clearance Commission. The problems presented by such a project continue to be studied by the Commission.

CHICAGO UNITED MISSION  
34 South Desplaines Avenue  
Louis West, Superintendent

Program. A mission and shelter (sixty beds). Men who are resident (ten to twenty-five) are being rehabilitated and stay for one or two years, usually. Men who attend services may receive a night's lodging on a temporary basis, a meal, and (if needed) clothing, after service. The work of the mission (preparation of food, cleaning up, etc.) is done primarily by men in the program. Religious counseling is given, both to men in the program and to those who apply for emergency aid. Many of the men reside in the mission and hold outside jobs, so that the mission functions as a "halfway house." (Amended by NORC)

COOK COUNTY DEPARTMENT OF WELFARE  
69 West Washington Street  
Raymond M. Hilliard, Director

Program. Administers General Public Assistance ("relief") and categorical assistance -- that is, Old Age Assistance, Disability Assistance, Blind Assistance, and Aid to Dependent Children. Men with Skid Row addresses are a part of the regular load.

Mr. Hilliard, Director, was chairman of the Mayor's Committee for Homeless Men in New York, and during his tenure a shelter was established and an integrated rehabilitation program -- the Hart Island Project -- which has been nationally recognized as one of the most successful programs for rehabilitation of alcoholics yet devised. Insofar as feasible, the more effective elements are being incorporated into the Chicago Welfare Program, within the limits of budget and personnel. For an estimate of the volume of Skid Row men under welfare programs, see Chapter 11 of this report. (Paragraph added by NORC)

Public Assistance allowances include food and lodging, clothing, incidentals, and medical or dental care as needed. Food and rent allowances are the same for recipients of categorical and general assistance. Food allowance for an unattached man cooking in his room is \$25.60 and for one eating meals in restaurants is \$50.20. Rent is allowed as charged the individual man, up to maxima, which in general are higher than rents in the Skid Row area, provided he can cook in his room for \$25.60 per month or eat in a restaurant off Skid Row for \$50.20 per month (\$1.67 per day). Since legislative enactment imposes a ceiling of \$80 per month on the total grant for Old Age Assistance and Disability Assistance, a homeless man can scarcely maintain himself anywhere else than on Skid Row, even though there is no departmental requirement that he live there, except, perhaps, in cases where the grant is paid by disbursing orders to particular Skid Row establishments. Even then, the homeless man must live at a minimal level of adequacy; after rent and restaurant meals are taken care of, he has only \$4.20 left from his monthly allowance for all other expenses.

Medical and dental care are provided as needed through payments to doctors, dentists, clinics, hospitals, etc. The Department does not operate a clinic and has no statistics on the amount of medical care provided men in Skid Row.

A monthly cash clothing allowance of \$3.75 is provided categorical-assistance recipients, and amounts to purchase individual clothing items are provided recipients of general assistance as needed.

There is a program of job placement and re-training to make the men self-sustaining to the greatest extent possible, through the Welfare Rehabilitation Service, 1327 West Washington Street, maintained by the Cook County Department of Welfare.

Welfare Rehabilitation Service also provides vocational counseling and placement service to alcoholics who belong to an Alcoholics Anonymous group that meets in the Welfare Rehabilitation office weekly. It refers problem drinkers to open meetings of Alcoholics Anonymous held weekly in the office.

The Welfare Department cooperates with various groups which give direct treatment to alcoholics and pays for care provided assistance recipients at Cathedral Shelter and Harbor Light Center. Men are encouraged to leave the Skid Row area.

COOK COUNTY HOSPITAL -- MEDICAL AND SOCIAL SERVICES  
1835 West Harrison Street  
Josephine Taylor, Director of Social Services

Program. A very large share of all medical care received by Skid Row men is dispensed by this hospital. All pensioners on public welfare receive medical care through its facilities. Emergency medical care needed because of delirium tremens, fractures or injuries due to falling, assault, or fighting, or acute attacks of chronic diseases (for indigent persons) are treated here, when brought by police, welfare personnel, or by self-referral. During the winter many emergency cases of acute pneumonia are treated. Also, the Mental Health Clinic (formerly Psychopathic Hospital) undertakes to give limited treatment for alcoholism but lacks facilities to detain a man beyond the time his strength and vitality have returned.

In conjunction with its medical care, the Social Service Department of the hospital undertakes to provide needed counseling, referrals for economic aid, contact with family, or other social services, to the men who are being treated. They cooperate with other agencies throughout the city to arrange for the convalescent or chronic care of the men when they are discharged, and also for rehabilitation services for those who could use them. Many Skid Row residents are welfare cases who live in cheap cubicle hotels or rooming-houses and go to Cook County Hospital every few days for a treatment, as an out-patient, for some disorder.

ILLINOIS STATE EMPLOYMENT SERVICE  
165 North Canal Street  
Walter E. Parker, Director

Program. Is a leading agency in helping obtain employment for Skid Row men. Maintains a Casual Labor Office at Jefferson and Madison Streets, which provides "spot jobs" (and some steady jobs) to applicants. A representative of the Central Industrial Office, 901 West Jackson Boulevard, goes daily to the Monroe Street police station and offers work to men being released from overnight detention. Also, Skid Row men get understanding treatment

at the State Employment Service Office at 371 West Adams Street, where jobs as dishwashers and kitchen helpers in restaurants are available.

Approximately 4,300 job placements of Skid Row men are made by the Illinois State Employment Service each month. About 150 of these are for steady employment.

INDIAN WORK OF DIOCESE OF CHICAGO  
3554 West Huron Street  
St. Timothy Church (Episcopal)  
The Rev. Peter Powell, Director

Program. Principal objectives are to support and assist Indians, both locally and nationally. In Chicago the organization works to obtain adequate housing for Indians, find employment, offer emergency assistance, maintain a clothing center for Indian people at St. Timothy's Church, maintain an emergency canned-goods shelf at the same parish, obtain scholarships for Indian young people. Counseling is offered as needed. Indian families are assisted in integrating into the parish life of the nearest parish. Local parish priests are notified concerning Indians living in their parochial boundaries.

These services are available to families and individuals, both men and women. On the national level the Center works in consultation with tribal councils and leaders on the reservations, in order that the Church may support Indians in obtaining just, positive, pro-Indian legislation at Washington. Also work in cooperation with the American Indian Center, Chicago Housing Authority, Mayor's Committee, and other agencies and groups working with and for Indians locally. On a national level they cooperate with the National Congress of American Indians, Indians' Rights Association, Association on American Indian Affairs, National Fellowship of Indian Workers, and other pro-Indian organizations working on a national level. Have notified Congress concerning the Episcopal Church's opinions concerning legislation affecting Indians.

LUTHERAN HOME RESCUE MISSION  
1701 West Monroe Street  
Sidney Swensen, Superintendent

Program. A mission oriented primarily toward helping families but also assists men from Skid Row who apply. Holds religious services. Issues clothing and shelter (tickets to Dawes Center). Gives religious counseling.

METROPOLITAN HOUSING AND PLANNING COUNCIL  
8 South Dearborn Street  
Mrs. Frederick H. Rubel, Executive Director

Program. This agency is concerned with slum problems, especially as they relate to housing conditions. In 1955, at the request of the Mayor's office, the Council attempted to establish minimum standards for cubicle-type hotels. An extensive examination of this type of hotel was made. The Council wrote a "model" dormitory-hotel code, with minimum requirements for the safety and health of the occupants, which was submitted to the Mayor.

MIDWEST COMMUNITY COUNCIL  
2822 West Jackson Boulevard  
F. Adrian Robson, Executive Director

Program. This Council covers the Skid Row area of West Madison Street. Its objective is community-wide improvement and hence is vitally interested in planning for improvement of conditions in Skid Row areas. It does not have a program of direct contact with the men, but several of the Skid Row agencies are members of the Council.

MONROE STREET COURT OF CHICAGO -- JUDICIAL ACTIVITIES  
1100 Racine Avenue  
Judge Raymond Drymalski, Chief Justice

Program. This branch of the Municipal Court of Chicago is specialized in handling the cases of homeless men arrested for drunkenness or other offenses in Skid Row areas. Offenders from North Clark and South State Streets are brought here for processing, as well as the men arrested on Madison Street. The Court has appointed a referee and a public defender, selected because of their qualifications to review the cases of chronic alcoholics. This referee interrogates each man briefly and makes a recommendation to the presiding judge concerning the disposition of his case. In general, men whose only offense is that they were drunk and disorderly are discharged, provided that the man is well enough to take care of himself. In this screening process, men who have special problems in need of welfare treatment are detected and referred to the Court's social worker. Men who are dangerously ill or in need of other emergency care are detained until the social worker has seen them. Men who are suspected of being seriously psychotic and possibly in need of institutionalization are referred to the Court psychiatrist. Also, the Illinois Employment Service has a representative at the Court to offer "spot jobs" to men who want work and to aid men of better caliber to find permanent employment. The Salvation Army also has a representative at the Court to lend assistance to cases of acute distress or to take care of men just coming off a drunk who show signs of DT's or who wish counseling.

In the past fifteen months, more than three hundred recalcitrant patients have been returned to the care of the municipal tuberculosis authorities. More than two hundred men who requested it have been furnished transportation to the state mental hospitals without the expense or delay of processing through the city or county psychiatrists.

The referee informs the men that the services of Alcoholics Anonymous are available to them through the Court. (A.A. meetings are held in the immediate area every evening, and a clubroom is maintained by the A.A. at the Vogt Hotel for the purpose of feeding and helping men who say that they want sobriety.)

The entire Court and its personnel know the "repeaters" and make a considerable effort to get newcomers off Skid Row, by warning them and by trying to make arrangements for their welfare. The Court processes between 45,000 and 60,000 cases per year.

Personnel. Presiding judge (rotated each ninety days)  
 Referee  
 Public defender  
 Bailiffs (3)  
 Clerks (2)  
 State's attorney  
 Municipal Court social service caseworker  
 Illinois State Employment Service caseworkers (2)

MUNICIPAL COURT OF CHICAGO -- SOCIAL SERVICE DEPARTMENT  
 1121 South State Street  
 Violet Park, Director

Program. The Social Service Department provides social services to the Monroe Street Court for men referred by the presiding judge and the referee. Interviews are held with men immediately after their appearance before the Court, and the public and private resources of the community are utilized to meet the particular needs of each individual. The service is of a short-contact nature and is primarily a referral service. A record is kept of the contact with each man. Initially, the service was established for men arrested and brought before the Court, but a large number of men seek the services of their own volition, either as a result of a previous contact or of having heard of the service from others in the community. The average number of men served is five hundred per month, or about six thousand per year.

OAK FOREST HOSPITAL  
 159th and Cicero Avenue, Oak Forest, Illinois  
 Carl K. Schmidt Jr., Superintendent

Program. A hospital for the care, long-term treatment, and rehabilitation of medically indigent residents of Cook County. Disabled, ill men from Skid Row are frequently referred here. They are semi-ambulant or ambulant types, generally, in very poor health.

OLIVE BRANCH MISSION  
 1051 West Madison Street  
 C. N. Schumaker, Superintendent

Program. Olive Branch Mission was originally founded for the purpose of ministering to underprivileged children by giving instruction in sewing, handicraft, and Bible classes. Located in the heart of the Skid Row district, the mission's activities were expanded to include nightly religious services for unemployed, homeless, and destitute men. Food, clothing, and shelter were provided, as well as assistance in securing employment.

In addition to a resident program for homeless men, free bed tickets and free meals are distributed to men in need. A registered nurse is available part-time to administer first-aid. The resident program for some thirty-two men is administered by trained counselors and volunteers. Meals and lodging are provided free until employment can be secured, after which remuneration is made on a share-the-cost basis. (Statement prepared by NORC from materials provided by Olive Branch Mission)

PACIFIC GARDEN MISSION  
646 South State Street  
Harry G. Saulnier, Superintendent

Program. One of the major resources for overnight shelter, meals, and emergency aid in Chicago. Holds religious services in morning, noon, and evening and provides food after morning and noon services -- twice daily.

In the depths of the winter, when the Mission's beds are all filled, the overflow of men with no place to go are permitted to sleep on newspapers (blankets are provided for covering) on the chapel floor. Free medical (Monday, Wednesday, Friday) and dental (Tuesday and Thursday) services available on the five evenings of the week, or in emergency. Registered nurse staff-member on duty six days a week. A resident staff is available to provide religious counseling, help obtain jobs, and help men get "off the bottom." Performs services of helping get in touch with family, provide clothing. Also operates a servicemen's lounge and dormitory to help keep servicemen on liberty out of trouble in South State Street's burlesque area.

The Mission operates a rehabilitation program for approximately forty residents. These resident men stay approximately one year.

A Women's and Children's Department is also operated on same basis as Men's Department. Food is provided three times daily. Whole families are cared for in emergencies until suitable housing quarters are located.

PETER MAURIN HOUSE  
1146 North Franklin Street  
Robert Bosshart, Supervisor

Program. Tries to help down-and-out men from Skid Row. Serves about three hundred men each evening, serves sandwiches during the daytime. Provides food, housing, clothing. Men residing in the house do a great deal of the work themselves -- preparation of food, housekeeping, etc. Two men direct the program. Sleeps fifteen men. Men can come either voluntarily or may be referred. Many men come from prison to get clothing or food.

POLICE DEPARTMENT -- MONROE STREET STATION  
100 South Racine Avenue  
Captain William McGuire, Chief

Program. To provide police protection in the district within which the West Madison Skid Row lies. Maintains a continuous twenty-four-hour patrol of Skid Row area. Men who are drunk and staggering and obviously unable to take care of themselves or defend themselves are arrested and locked up at the station to sober up. Bottle gangs (groups of men drinking from bottles on the street or in alleys) are broken up, usually with arrests. On an average, one hundred to two hundred (usually about 125) men are arrested and locked up each day on charges of disorderly conduct or public intoxication. This totals about 45,000 to 60,000 arrests per year and is equal to almost one-half of the total arrests made in Chicago for offenses other than traffic violations.

Officers on foot-patrol enforce the city ordinances concerning the sale of liquor in taverns. Their primary activities consist in seeing that no tavern sells liquor to an intoxicated man, that the lives and property of intoxicated men are protected from jackrollers and other malicious persons, that there is no prostitution or soliciting by prostitutes in taverns, and that intoxicated patrons are not short-changed or taken advantage of in any way by tavern operators. They also inspect taverns and other establishments to enforce the law against gambling in all forms and the laws concerning the distribution or sale of narcotics. They prevent fighting and arrest those who are guilty of assault. Major thefts are comparatively infrequent; the officers report that while they are drunk, homeless men are more helpless than vicious.

The standing orders are to give humane, protective treatment to men who are intoxicated, to remove to Monroe Street Station men who would freeze or suffer from exposure or be subjected to dangerous attack if left on the street. The objective of this police action is not to apprehend for purposes of punishment (unless, of course, the men break ordinances for which arrest is prescribed), but for purposes of protection of the individual who is no longer able to care for himself.

At the Monroe Street Station the intoxicated men in the "bull-pen" are given coffee and a sandwich and are detained until the Monroe Street Court is convened on the morning of each day.

Personnel. (Total of 139)

Chief  
 Lieutenants (3)  
 Desk sergeants (12)  
 Patrol officers (total of 113)  
     Squad cars (28)  
     Detectives (21)  
     Post-men (motorcycles -- 52)  
     Patrol wagons (12)  
 Lockup keepers (9)  
 Crossing guard.

READING ROOM  
 941 West Madison Street  
 George Cooper, Director

Program. A reading-room with books and magazines. There is also a television room and facilities for bathing and shaving, laundry, sewing, and emergency first-aid. Stationery is available for writing letters. Provides a place for men to spend time without sitting in taverns; many men on Skid Row have no place to go during the daytime. It is located in the "heart" of Skid Row, is non-sectarian and bi-racial. Men who have no address (men who are so destitute that they sleep under bridges, in warehouses, in boxcars, etc.) frequent the Reading Room. Many men use it as a mail-receiving address, either because they have no other, or because they are afraid to receive pension checks at their hotel or rooming-house. (Sentence added by NORC)



The Reading Room cooperates with all other agencies and is a very useful information and referral point for men looking for work, who are ill, or who have another emergency. Men who are intoxicated are asked to leave. During the winter months is severely overcrowded. The number of men desiring to come in greatly exceeds the capacity, and men must stand in line outside waiting for a turn to get in. Observers in many different organizations regard it as one of the most worthwhile welfare activities sponsored by the City of Chicago in behalf of homeless men.

ST. LEONARD'S HOUSE  
2100 West Warren Avenue  
The Rev. James G. Jones, Executive Director

Program. Provides a rehabilitation program for selected men released from prison. In addition to providing for basic material needs, the program offers opportunity for improvement of interpersonal relationships through group living. A multi-disciplinary approach is used in both individual counseling and regular group sessions. Men taken by referral only. A nominal fee is charged.

Personnel. Executive Director  
Rehabilitation counselor  
Psychiatric social worker  
House manager  
Public relations manager  
Cook.

SALVATION ARMY -- HARBOR LIGHT CENTER  
654 West Madison Street  
Major Roland Quinn, Director

Program. Operates one of the largest single rehabilitation programs for Skid Row men. Its headquarters, located in the "heart" of Skid Row, is an in-take center for unattached, homeless alcoholics. Services are held each evening, after which the men receive a free meal. Those interested in entering the rehabilitation program are interviewed next day by counselors, who also try to help with problems other than drinking which the candidate may have. The counseling staff consists of professional social workers, psychologists, and medical staff, as well as men who have themselves been active alcoholics. The rehabilitation program consists not only of religious instruction and services, but also psychotherapy, casework, vocational counseling, medical help, clothing, work therapy, and employment. Each day the Harbor Light Center sends a representative to the Monroe Street Court, to lend assistance to any man who wishes to enter the rehabilitation program or who needs emergency help that the Salvation Army is equipped to give. (Coffee and doughnuts are dispensed free each morning at the Monroe Street jail to men who have been locked up overnight.) It also acts as a referral service to other units of the organization and to other social agencies. Referrals within the Army include Men's Social Centers, Family Welfare Division, Emergency Lodge, Correctional Services Department, clinics, hospitals, camps, and Salvation Army Neighborhood Corps. The rehabilitation program is able to accommodate about

one hundred eighty residents at any one time. These men are encouraged to attend the church and groups of their own choice, including Alcoholics Anonymous.

In addition to its rehabilitation program for alcoholics, Harbor Light Center tries to serve the other residents of Skid Row. It sponsors a Golden Agers club for elderly men on the street. It has extended its spiritual and material care program to include psychiatric counseling and medical care. Alcoholism is recognized as a disease. To meet the emotional and medical aspects of this illness, Harbor Light has established a psychiatric and medical out-patient clinic. The out-patient clinics were established with the aid of state funds from the Division of Alcoholism.

The Psychiatric Clinic staff consists of a director of special services, a consulting psychiatrist, psychologist counselor, and psychiatric caseworkers. The treatment is focussed on the underlying conflict which is a contributing factor to excessive drinking, and is available to individuals living in or away from the Center. In its efforts to improve the individual's total adjustment, the Harbor Light clinic program is a down-to-earth effort to treat and rehabilitate the alcoholic through psychiatric counseling. The professional staff at the Center accepts for treatment individuals needing help and potentially willing to involve themselves in the solution of their drinking problems. The clinic is open five days a week, Monday through Friday, from 9:00 A.M. to 4:30 P.M., and evenings by appointment.

The Medical Clinic was established in October, 1958, and at present handles an average of five hundred visits per month. The clinic is staffed by two part-time physicians, one full-time registered nurse, and one part-time registered nurse. It is open five days a week and maintains the same hours as the Psychiatric Clinic. Services given include sedation, dressings, vitamins, and a wide variety of first-aid treatments. Referrals to other clinics and hospitals are made when indicated.

An open-door policy is followed at the Medical Clinic. Any person who may walk in off the street, as well as patients already a part of the Harbor Light program, are accepted. The clinic will treat patients by appointment who are referred to it by other social agencies.

Personnel. Officer in charge of Harbor Light Center  
 Director of special services  
 Director of psychiatric clinic  
     Psychologist-counselor  
     Psychiatric caseworker  
 Director of medical clinic  
 Physician  
 Nurses (2).

SALVATION ARMY -- MEN'S SOCIAL SERVICE CENTER  
 509 North Union Avenue  
 S/Captain William Benton, Executive Director

Program. The program houses approximately two hundred men, provides them with food, lodging, and clothing. The men enter the program voluntarily. They come from a variety of sources -- men released from prison, referred by other units of the Salvation Army, or self-referral at suggestion of a welfare organization.

The object of this Men's Social Service Center is to rehabilitate men by helping them to help themselves. The Center carries out a work program that permits each man to "earn his keep" and have some spending-money. Meanwhile, he participates in a rehabilitation or therapy program which undertakes to help him overcome the condition which brought him here.

The program is geared to the development of strength of character until the man is again strong enough to assume the responsibilities of life. Proper food, rest, clothing, work therapy, and counseling are included in the program. Wholesome recreation, physical examination, spiritual guidance and encouragement, and an active program of assistance for alcoholics are all a part of the endeavor to bring men back to society. (Amended by NORC)

SENIOR ACHIEVEMENT  
 1029 South Wabash Avenue  
 Dr. David E. Sonquist, Executive Director

Program. The program of Senior Achievement is limited to elderly persons (over sixty years of age). Its purpose is to provide supplemental income and useful, remunerative work which utilizes the many varied skills and experience of these persons. Senior Achievement operates a metal- and woodwork shop, packaging and assembling workshop, engineering and drafting shop, and also operates a work service program which is available to business, industry, and social organizations. Its aim is to help older people to help themselves. The program is preventative rather than remedial. Many workers are enabled to keep off the relief rolls due to their employment here.

Elderly people are not considered to be handicapped at this Center. It attempts to help retired persons to continue their normal pattern of living as nearly as possible. In no sense can it be considered a welfare organization. A few elderly persons from the Skid Row area are participants. (Amended by NORC)

SUNSHINE GOSPEL MISSION  
 604 North Clark Street  
 The Rev. William Dillon, Superintendent

Program. Mission has two programs: (a) daily religious services, followed by a meal; clothing is issued to men in need; and (b) a program of rehabilitation for men with a drinking problem. About twelve to fifteen men at any one time. Men in this program live in the Center, have daily Bible study

class. They maintain the house and do all of the needed work; many have outside employment. The Mission also operates a rehabilitation farm in central Wisconsin. The Mission is an independent, non-profit organization that has been in existence for more than fifty years.

TRAVELERS AID SOCIETY  
22 West Madison Street  
Ralph W. Collins, Executive Secretary

Program. Primarily established to give emergency service to moving people away from home who have difficulties of a societal, emotional, or medical nature. About fourteen per cent of the persons seen by the agency are newcomers, or migratory workers unfamiliar with Chicago, who are in need of housing, food, and employment. In situations of serious social, medical, or psychiatric problems affecting these newcomers and migratory workers, agency gives casework service, including temporary financial help, referral to specialized Chicago agencies, and communication with the home community to mobilize resources. Some long-term residents of Skid Row apply at Society offices in transportation terminals and are given emergency services related to severe social, medical, or psychiatric problems, although the major program of the agency focusses attention on travelers.

U.S. PROBATION AND PAROLE SERVICE,  
U.S. DISTRICT COURT OF NORTHERN ILLINOIS  
Room 229, U.S. Court Building  
Clark and Adams Streets

Program. Supervision of probation. Some of its probation cases (eight to ten per cent) live on Skid Row. Responsible for the supervision of federal probationers, parolees, and military parolees. Also is responsible for making pre-sentence investigations prior to incarceration. Probation officers perform counseling services in relation to the adjustment and attitude of those under supervision.

WELFARE COUNCIL OF METROPOLITAN CHICAGO  
123 West Madison Street  
Robert H. MacRae, Executive Director

Program. Community planning for the improvement of health and welfare services in metropolitan Chicago. Program includes identification of unmet needs, research, formulation of plans to meet the needs, and action to implement the plans. Plans may require improving standards and coordination among existing agencies, expansion of agency programs with new areas of service, or creation of new agencies. The needs of homeless men of Skid Row are a concern of the Council.

WEST CENTRAL ASSOCIATION  
549 West Washington Boulevard  
Paul A. Jenkins, Executive Director

Program. This association combines corporations which are interested in reclaiming a section of Skid Row, from Halsted Street to the Canal, and incorporating it as an integral part of Chicago's downtown business district, as conceived in the City's present Development Plan for the Central Area of Chicago.

YOUNG MEN'S CHRISTIAN ASSOCIATION  
19 South LaSalle Street

Program. Helps young men who are new arrivals in the city, by providing good lodging and meals at a reasonable price. It also provides an environment which furnishes friends, recreation, and aid in getting adjusted. For many newcomers to Chicago, it is the alternative to living in a cheap hotel on Skid Row, or in the vicinity of Skid Row. (Statement prepared by NORC)

Summary of Municipal Expenditures on Skid Row.

Following is an estimate of the expenditures the City of Chicago makes in behalf of Skid Row men. When the money total is multiplied by twelve, to convert from months to years, it shows that Skid Row costs Chicago taxpayers \$4,719,948 per year.

<u>Agency</u>	<u>Amount per month<sup>1</sup></u>	<u>Manpower (number of employees)</u>
Board of Health of Chicago . . . . .	\$ 500	2
Chicago Alcoholic Treatment Center . . . . .	3,486	5
Chicago Department of Buildings . . . . .	700	1
Chicago Department of Fire Prevention . . . . .	4,200	8
Cook County Department of Welfare . . . . .	248,800	30
Cook County Hospital . . . . .	58,000	32
Illinois State Employment Service . . . . .	2,300	5
Municipal Court -- judicial activities . . . . .	4,000	10
Municipal Court -- social services . . . . .	677	1
Oak Forest Hospital . . . . .	12,000	16
Police Department . . . . .	57,966	131
Reading Room . . . . .	700	3
TOTAL . . . . .	\$ 393,329	244

<sup>1</sup>How estimates of value of services to Skid Row men were derived:

Board of Health of Chicago: Data furnished by the City.

Alcoholic Treatment Center: Assume equivalent of seven men from Skid Row continuously in residence and that one-fifth of the annual budget and staff time should be allocated to Skid Row.

Chicago Department of Buildings: Assume annual Skid Row inspection is equivalent to one inspector working full-time at the rate of \$450 per month. Estimated costs of reinspection, enforcement, and so forth, of violations in Skid Row area equal to additional \$250 a month. Estimate includes travel costs, administration pro-rated to Skid Row inspection, which is probably very conservative.

Chicago Department of Fire Prevention: Assume eight additional firemen on detail who would not be there if Skid Row were a normal residential neighborhood. Assume salary of \$500 per month, with \$200 per month expense, associated with special Skid Row inspections. No allowance for extra staff, extra equipment, at regular fire stations in the Skid Row area.

Cook County Department of Welfare: Assume load equivalent of three thousand Skid Row men continuously, with average direct expense of \$75 per month. Assume caseworkers assigned to this load (one hundred cases per worker) are thirty, with an average salary of \$400 per month. Assume five per

cent of total payments are required for administration, incidental other expenses, share of maintaining offices, office staff, etc.:

	3,000 x \$75 =	\$ 225,000
	30 x \$400 =	12,000
Administration (5%) =		<u>11,800</u>
Total . . . .		\$ 248,800

Estimate contains no allowance for medical expenses (estimated as part of contribution of Cook County Hospital). This probably is a very conservative estimate. Records in the Welfare Department indicate a larger load than three thousand (Chapter 11 estimates about 2,900). The share of overhead and administrative expense attributed to Skid Row is minimal.

Cook County Hospital: Assume a continuous load of one hundred fifty bed cases from Skid Row (including Skid Row welfare cases hospitalized -- see Chapter 1) at an average actual expense of \$12 per day for food, medical service, hospital expenses, and so forth. Assume further that the three thousand welfare cases each averages two clinic trips per year, with \$5.00 expense for physician's consultation and medicine. Assume further ten emergencies per day from Skid Row (DT's, cuts, wounds, and breaks requiring surgical care), where patient is released, at \$5.00 per case for care and medicine:

	<u>Per month</u>
Hospital -- 150 x \$12 x 30 =	\$ 54,000
Clinic -- 3,000 x \$5 x 2 ÷ 12 =	2,500
Emergencies -- 10 x 30 x \$5 =	<u>1,500</u>
Total . . . .	\$ 58,000

This includes no cost for services rendered by the Social Service Department, ambulance services, visiting nurses, etc. From data given in earlier chapters, the estimates of clinic visits and emergencies probably are conservatively low.

Illinois State Employment Service: Assume that a total of five persons are employed full-time (at 901 West Jackson Boulevard or 371 West Adams Street) in helping find jobs for Skid Row men, with average salary of \$400 per month. Assume that cost of renting and operating (or maintaining) special office at 901 West Jackson Boulevard is \$250 per month and that other expenses related to the Skid Row employment program average \$50 per month:

Salaries -- 5 x \$400 =	\$ 2,000
Rent =	250
Other expenses =	<u>50</u>
Total . . . .	\$ 2,300.

Monroe Street Court: Estimated salaries of officials (annual) as follows:

Presiding judge (half-time) . . . . .	\$ 5,000
State's attorney . . . . .	7,000
Referee. . . . .	7,000
Public defender. . . . .	7,000
Bailiffs (3) . . . . .	15,000
Clerks (2) . . . . .	9,000
Caseworker . . . . .	<u>4,500</u>
	\$ 54,500
Expenses of the court. . . . .	<u>1,800</u>
Total. . . . .	\$ 56,300

Assume that eighty-five per cent of the load is connected with Skid Row:

$$85\% \times \$56,300 = \$47,855 \div 12 = \$3,988 \text{ per month}$$

This makes no allowance for expenses for week-end and holiday court.

Oak Forest Hospital: Assume that at any one time there are fifty disabled and ill men transferred here from Skid Row addresses, and that actual maintenance expense of operating the institution is \$8.00 per day per patient.

Police Department: Assume 139 men at \$425 per man per month. Further assume \$1,500 per month for maintenance and depreciation on cruisers, wagons, and three-wheelers. Further assume \$800 per month for maintenance of the station -- telephone, heat, light, building maintenance. Assume that eighty-five per cent of police activity is devoted to Skid Row.

Salaries . . . . .	\$ 59,075
Depreciation . . . . .	1,500
Maintenance. . . . .	<u>800</u>

$$\text{Total. . . . } \$ 61,375 \times 85\% = \$52,169$$

Assume cost of police in North Clark Street and South State Street is ten per cent of expense at Racine Street Station:

$$\text{Total} = \$52,169 \div .9 = \$57,966$$

The amount for police has been underestimated by a wide margin. The number of police officers assigned to duty in Skid Row areas is considerably larger than indicated, and average salary levels are higher than assumed.

Reading Room: Estimated cost of salaries, rent, light, heat, etc.



A consistent effort was made, in making these estimates, to err on the low side and to include only costs that are being incurred in excess of the costs for a "normal" residential neighborhood. It is very probable that the true total, if it could be known, is well in excess of five million dollars.

What does Chicago buy with this money? It goes to accomplish four major purposes. Essentially, it purchases these commodities:

<u>Purpose</u>	<u>Monthly expenditure</u>	<u>Per cent of total</u>
(a) Care of indigent Skid Row residents of Illinois (Department of Welfare, Cook County Hospital, Oak Forest Hospital) .	\$ 318,800	81.1
(b) Repetitive arrest and overnight detention of chronic alcoholic Skid Row men (Police and Monroe Street Court -- judicial activities) . . . . .	61,966	15.8
(c) Inspection and enforcement of codes for health and safety (Board of Health, Chicago Department of Buildings, Department of Fire Prevention) . . . . .	5,400	1.4
(d) Rehabilitation (Alcoholic Treatment Center, Reading Room, Municipal Court -- social services department, Illinois State Employment Service) . . . . .	<u>7,163</u>	<u>1.8</u>
Total . .	\$ 393,329	100.0

At the present time the City of Chicago is doing very little that is oriented toward arriving at a long-range solution to the Skid Row problem. Only 3.2 per cent of its total expenditures in the Skid Row area might be considered as attempting to improve conditions, help the men toward rehabilitation, and fight actively the complex of factors that create Skid Row. More than eighty per cent of the expenditures are devoted to keeping people alive at the minimum level of subsistence our morals allow. None of the agencies in Group (a) above has a budget for a vigorous rehabilitation program. As the above descriptions of their activities make clear, they are seriously understaffed, overworked, and dollar-hungry, and are able only to discharge their life-perpetuating activities. There are no facilities, staff, or funds for rehabilitation or prevention, and what work of this kind is done is done "on the fly."

An additional 15.8 per cent of the public funds are spent in a dreary business of arresting chronic alcoholic men, detaining them overnight in order to turn them loose again on the streets the next day, so that they may be re-arrested, re-detained, and re-released, so that they may be re-arrested, etc. This serves only two useful functions -- (1) to protect the drunken man from exposure to the elements, and (2) to cull out the ones who are too weak, too sick, or too mentally deteriorated to be "turned back to pasture" for another day in the taverns. It does nothing to help any man to stop drinking. The

Referee at Monroe Street Court screens one hundred twenty-five to two hundred men in less than one-and-a-half hours, which gives him between forty-five seconds and one minute per "client."

At the present time the active constructive program of the city, county, and state consists solely of alcoholic treatment for seven Skid Row men (out of a total of at least 4,800 who need it), brief counseling and advice from overworked social workers at the Department of Welfare, Cook County Hospital, and the social worker at the Monroe Street Court, an opportunity to read or to clean up at the Reading Room, a chance to work at spot labor through the Illinois Employment Service, and enforcement of the city's building code that has been modified by special arrangements in such a way that living in 5x7 cubicles is legal.

Chicago's Skid Rows are a lot better than they used to be. These activities are very important and have done much to improve conditions on Skid Row in the past few years. They are not enough, however, to constitute a full-scale program of rehabilitation and reduction of Skid Row.

#### Summary of Private Expenditures on Skid Row.

The private agencies perform two important types of function for the homeless men of Skid Row. The public agencies do comparatively little work of these two types:

(a) Private agencies provide emergency care for men who are completely destitute. The man who is "down on his luck" and has absolutely no money can get help to "keep going." He can get better clothes if he needs them, can get meal tickets or free meals by attending mission services, and can get a free night's lodging at a mission. Emphasis is given in this care to "deserving" men who are victims of circumstance or poor judgment, not men who are alcoholic derelicts or professional beggars who show few evidences of trying to get off Skid Row. Private agency help is especially useful to the person who is not a legal resident of Illinois, who is waiting for his welfare status to be determined, or who has been placed, for any reason, in the embarrassing position of not knowing where he will get his next meal or where he will sleep the following night. The amount of emergency help given homeless men on Skid Row is really impressive, as the following sum of their activities show:

<u>Activity</u>	<u>Number per month</u>
Meals given without charge to "walk-ins" from street, after religious service, etc. . . . .	68,566
Man-nights' lodging (beds) given away without charge to "walk-ins" from street, referrals, after religious service, etc. . . . .	14,758
Clothing given away (equivalent of complete sets of clothing -- trousers, shirt, shoes, coat) . . . .	5,674
First-aid treatment given . . . . .	524.

(b) Private agencies perform almost all of the efforts that are made to accomplish a long-range rehabilitation of these men. Whereas the long-range plan of the public agencies is one of "containment" and caring for the minimum physical needs, the private agencies place great emphasis upon trying to cause a fundamental change in the personality or situation of the man that would cause him to be able to leave Skid Row and maintain himself in the outside community. Almost one hundred per cent of the present efforts being made to "do away with" or to "solve the problem of" Skid Row are being made by private missions or other groups, working in cooperative independence of each other. The following summary illustrates the situation:

<u>Agencies with rehabilitation programs</u>	<u>Estimated number of men under treatment at the present time</u>
Total Skid Row men being treated for alcoholism and other personal problems . . . . .	<u>640</u>
Public agencies . . . . .	20
Private agencies . . . . .	<u>620</u>
Cathedral Shelter . . . . .	6
Catholic Charities . . . . .	22
Chicago Christian Industrial League . . .	90
Chicago United Mission . . . . .	10
Olive Branch Mission . . . . .	32
Pacific Garden Mission . . . . .	40
Peter Maurin House . . . . .	15
St. Leonard's House . . . . .	10
Salvation Army - Harbor Light Center . . .	180
Salvation Army - Men's Social Service Center	200
Sunshine Mission . . . . .	15

This is just a rough estimate, assuming that seven men are in the Alcoholic Treatment Center and about thirteen are at Manteno or other public institutions.

The total volume of services performed by private agencies in trying to influence the course of the lives of homeless men is really substantial, as the following summary of their activities shows:

<u>Activity</u>	<u>Number of men helped per month</u>	
	<u>Private</u>	<u>Public</u>
Counseling:		
(a) To help overcome alcoholism. . . )		
(b) To help solve economic, medical, )	14,590	1,882
welfare problems. . . . . )		
(c) In religious, spiritual matters. )		
Permanent and temporary jobs arranged for .	1,623	5,336

About one-fourth of all meals (25.7 per cent) and lodgings (22 per cent) provided for homeless men are distributed through private agencies. More than four-fifths (88.6 per cent) of all counseling in the areas of alcoholism, economic, medical, welfare, religious, and spiritual problems is made by private agencies. Over half of the medical (55.9 per cent) and first-aid treatment (56.7 per cent) given is through private agencies. In the area of employment, they have provided more than one-fifth (23.3 per cent) of all jobs secured for homeless men. The volume of recreation services, however, appears to be low in comparison to the total (approximately 95 per cent of recreation services are provided by public agencies).

Almost one-half of all personnel working with homeless men are connected with private organizations; they furnish 44.9 per cent of total man-months and 45.9 per cent of professional man-months.

The total of all private expenditures on behalf of homeless men on Skid Row is \$70,221 per month, or \$842,652 annually. This represents 15.1 per cent of total expenditure made by both public and private sources. In view of the discrepancy in monetary expenditures made by public and private agencies, the volume of services enumerated for private agencies in Table 13-1 is impressive.

## Chapter 14

### WHAT SHOULD BE DONE ABOUT THE HEALTH, REHABILITATION, AND WELFARE OF HOMELESS MEN ON SKID ROW: VIEWS OF RESOURCE PERSONS

When the resource persons were being interviewed, advantage was taken of the opportunity to ask them the question, "What should be done about Skid Rows and the people who live on them?" Replies to these questions are summarized and reported in this chapter and the next. This chapter will deal with their recommendations concerning health, rehabilitation, and welfare; the next chapter discusses their recommendations concerning housing and living conditions. In interpreting these materials, it must be kept in mind that the opinions obtained were based upon general experience, and were made before any of the analytical materials obtained from the homeless men themselves and reported in other parts of this monograph had been made available. It is entirely possible that subsequent reading of the materials of this research may cause some respondents to "switch their votes" with respect to particular types of welfare or housing action.

A most surprising fact (at least surprising to the researchers) developed from the tabulation of the resource persons' recommendations: the experienced observers were in essential agreement on a program of action. A very high percentage of them cast a vote of approval for many items while for other items there was almost universal disapproval. Thus, although they probably were not aware of the fact, the broad outlines of a program that could elicit the support of both welfare and housing experts already had been formulated in the minds of the persons most familiar with the situation. Years of contact with the problem, thinking and reading about it, discussing it with others, and observing the failure and success of particular efforts being made had caused some recommendations to gain favor, and others to fall into disfavor. To be sure, there is not full unanimity, and there is considerable diversity concerning a few specific items. But there is consensus on almost all of the leading issues.

During the interview, the recommendations of the resource persons were obtained by a two-step procedure. First there was an informal conversation-type exploration of their views, which was then followed by a more formal type of questioning in which they were asked to state whether they approved or disapproved of particular types of possible action.<sup>1</sup> (They were also asked to state how strongly they approved or disapproved of these programs.) In presenting these materials, this sequence will be reversed: the judgments concerning specific measures will be reviewed first, and then the informal answers will be summarized to explain why the experts took the stand they did and the reasoning on which their opinions was based. Persons

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<sup>1</sup> ~~The interviews with the resource persons were preceded by reading of available literature and informal discussions with selected resource persons, in order to learn what the major proposals for action were. The list of formal questions submitted to the experts represented an inventory of the suggestions that had been made, insofar as the investigators were able to determine it.~~

who disagreed with the specific proposals often suggested alternatives, and these are included here also.

The materials of this chapter are divided into five sections, as outlined below:

Section I - Outline of a General Program for Health, Rehabilitation, and Welfare

Section II - Outline of a Program for the Treatment of Alcoholism

Section III- Organization of Efforts to Accomplish a Rehabilitation Program

Section IV - Recommendations Concerning Treatment of Alcoholics

Section V - Recommendations to Assist Homeless Men Who Are Not Alcoholics

Section I - Outline of a General Program for Health, Rehabilitation, Welfare

It is frequently said that prevention of degeneracy and rehabilitation of homeless men must accompany a major housing attack on the problem of homeless men if long-run success is to be accomplished. This means that a welfare program and a housing program must be integrated with each other. This section undertakes to inventory your ideas concerning the elements of a welfare program that would be both effective and practical.

In your opinion, what should be the elements of a program of rehabilitation and prevention of degeneracy in homeless men areas? Here are some possible activities. We would like to know how you feel about including each of the following activities as part of a comprehensive program for homeless men areas. For each activity, we want to know whether you strongly approve, approve, disapprove, or strongly disapprove.

A. Nothing should be done in addition to present facilities available for all citizens.

	<u>Percent</u>		<u>Percent</u>
Approve . . . . .	5	Strongly approve . . . . .	<u>100</u> 0
Disapprove . . . . .	81	Approve . . . . .	5
		Disapprove . . . . .	25
		Strongly disapprove . . .	56
		Can't decide and no answer . . . . .	14

B. A unit should screen homeless men applying at health, welfare, or charitable agencies for assistance. The men should be referred to the proper agency, with preliminary recommendations for a program of help or rehabilitation.

	<u>Percent</u>		<u>Percent</u>
Approve . . . . .	83	Strongly approve . . . . .	<u>100</u> 57
Disapprove . . . . .	5	Approve . . . . .	26
		Disapprove . . . . .	3
		Strongly disapprove . . .	2
		Can't decide and no answer . . . . .	12

C. If the city has a municipal shelter program, the admission of persons to this shelter, the conditions under which they remain, and the standards of conduct they must maintain should be regulated by welfare authorities.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 79	Strongly approve . . . . . $\frac{100}{50}$
Disapprove . . . . . 6	Approve . . . . . 29
	Disapprove . . . . . 3
	Strongly disapprove . . . 3
	Can't decide and no answer . . . . . 15

Note: If you do not approve of a public shelter program, indicate by placing an X in the box provided . . .   
(See next chapter for data on approval of the shelter itself.)

D. Facilities should be provided to counsel and advise applicants concerning personal, financial, or other problems that may be contributing to their present condition.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 90	Strongly approve . . . . . $\frac{100}{58}$
Disapprove . . . . . 2	Approve . . . . . 32
	Disapprove . . . . . 1
	Strongly disapprove . . . 1
	Can't decide and no answer . . . . . 9

E. Facilities should be provided for obtaining clothing, and arranging for meals and essential expenses for non-alcoholic men in need of temporary assistance while finding work and getting their first pay.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 86	Strongly approve . . . . . $\frac{100}{61}$
Disapprove . . . . . 3	Approve . . . . . 25
	Disapprove . . . . . 3
	Strongly disapprove . . . --
	Can't decide and no answer . . . . . 11



F. Facilities should be provided for helping applicants obtain employment, both regular and temporary.

<u>Percent</u>		<u>Percent</u>	
		<u>100</u>	
Approve . . . . .	90	Strongly approve . . . . .	<u>68</u>
Disapprove . . . . .	1	Approve . . . . .	22
		Disapprove . . . . .	1
		Strongly disapprove . . . . .	--
		Can't decide and no answer . . . . .	9

G. Facilities should be provided for helping applicants obtain needed medical, psychiatric, or health care.

<u>Percent</u>		<u>Percent</u>	
		<u>100</u>	
Approve . . . . .	91	Strongly approve . . . . .	<u>69</u>
Disapprove . . . . .	1	Approve . . . . .	22
		Disapprove . . . . .	1
		Strongly disapprove . . . . .	--
		Can't decide and no answer . . . . .	9

H. Facilities should be provided for inspecting and observing the living conditions and operating practices in hotels, lodging-houses, restaurants, taverns, and other business establishments serving these men, and to bring to the attention of police, health authorities, or others, instances of violations of municipal codes that affect the health, safety, or welfare of the homeless men.

<u>Percent</u>		<u>Percent</u>	
		<u>100</u>	
Approve . . . . .	91	Strongly approve . . . . .	<u>76</u>
Disapprove . . . . .	3	Approve . . . . .	15
		Disapprove . . . . .	2
		Strongly disapprove . . . . .	1
		Can't decide and no answer . . . . .	7

I. Facilities should be provided to seek the aid of the men's families in an effort to get financial support and assistance in effecting their rehabilitation.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 70	Strongly approve . . . . . $\frac{100}{44}$
Disapprove . . . . . 15	Approve . . . . . 26
	Disapprove . . . . . 10
	Strongly disapprove . . . 5
	Can't decide and no answer . . . . . 15

J. Facilities should be provided for a city-wide program of low-cost, all-season recreation for low-income homeless persons that would make it possible to find companionship and recreation without recourse to taverns. This could include recreation rooms, TV, clubs and interest groups, therapy classes.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 85	Strongly approve . . . . . $\frac{100}{56}$
Disapprove . . . . . 4	Approve . . . . . 29
	Disapprove . . . . . 4
	Strongly disapprove . . --
	Can't decide and no answer . . . . . 11

K. Facilities should be provided for occupational retraining and rehabilitation of non-alcoholic men with physical handicaps or low degrees of skill.

<u>Percent</u>	<u>Percent</u>
Approve . . . . . 92	Strongly approve . . . . . $\frac{100}{66}$
Disapprove . . . . . 1	Approve . . . . . 26
	Disapprove . . . . . 1
	Strongly disapprove . . --
	Can't decide and no answer . . . . . 7

Detailed Comments on Section I

In reporting their reaction to the above general program, the resource people made several side comments worthy of reporting for general consideration. Following is an edited version of these comments (shortened and in some cases reworded slightly for greater precision).

Item B.

You should not overlook the referring that is already being done. They do it at Monroe Street Court (and do a fine job). They refer each other--the old timers on the street know where to go. And these hotel clerks are amateur referral agencies in themselves.

Item C.

Disapprove. Welfare workers are not always competent to decide. This is particularly true if the worker is a woman, and acts principally from sentimentality.

Approve of welfare administration as opposed to police administration.

Personnel for this work should be highly trained and qualified for this specialized welfare function.

Municipal operation does not assure standards will be good. It depends on who handles it and how it is handled.

Item D.

Disapprove. I don't think it would be practical. You have no idea how many men would flood in and just talk. So far as helping them to rehabilitate themselves, I don't think it would be of much value. In principle I'd approve but on a practical realistic basis I'd disapprove.

This should be done by social service workers under the direction of a psychiatrist.

Item E.

Approve for physically or mentally disabled; disapprove for mentally and physically sound men.

If this could be confined to non-alcoholics. The problem is, how do you determine this? Many alcoholics would apply and say they "never had a drink in their lives."

Item F.

But the man should also help himself. They are not babies; don't deal with them as if they were.

## Item G.

Unless you can get dedicated people to run such a facility, it will not be very successful. There are no psychiatrists available.

## Item I.

Disapprove. You are putting the cart before the horse. These men have run away from a family; they don't want help from their families or want their families to know they need help. The family is a part of the problem.

Might be worth the effort, but don't expect much.

More often than not, the men's families are the basic cause of their difficulties.

Should not be compelled, as many families are at the end of their rope.

Disapprove. The amount of energy, money, and lost time this requires does not make it practical.

Only in cases where the man involved consents. Many men would resent this and prefer that their identity be concealed from families. Rehabilitation could be retarded.

Sometimes all affection is lost and a man has to prove himself before he can again be reunited with his family. I once had a mother say, "I wish he were dead." I think the effort should be made, even if the response is negative.

## Item J.

Disapprove. Make known what is already available--supplement agencies already working in this field.

This should be done, however, as a carefully planned integrated program with other welfare agencies.

## Item K.

This should be integrated with existing programs for rehabilitation.

It must be accompanied by an effort to get employers to hire this type of laborer.

Suggestions:

What about parolees? They also are homeless men. Something should be said and done about the problems they face and some facility should be provided for their development and re-entry into society. The two problems might be considered together.

Suggestions (continued)

The legal barrier of residence requirements should be abolished--especially for aid that would help the man become self-supporting.

I would suggest that the magistrate court with authority for summary convictions and the workhouse, house of correction, and jails are the natural "screening depots" for the homeless men who are drunk and disorderly or vagrant. We should work to enable proper staffing there, since so many of the clients of agencies with homelessness as one of their problems show up in these places sooner or later.

Suggest a comprehensive program of evaluation of all suggested programs and of all actual programs and services provided by various agencies.

If a program is established, it should be an integrated one, so that the public and private resources are utilized. Such a program should be set up as a welfare unit either of city or county and placed within as part of proper administration.

It might not be a bad idea to have a small emergency clinic, operated as an outpost of Cook County Hospital, located in the area. It would relieve the pressure on County and probably would get the men to come in for badly-needed medical help--especially the old pensioners. Visiting nurses have an awful time going through those cage hotels; many of them just refuse to go.

Section II - Outline of a Program for the Treatment of Alcoholism

In your opinion, what should be the elements of a program of rehabilitation and prevention for chronic alcoholism in homeless men areas? Below are listed some possible activities. Please indicate whether you approve or disapprove having each activity included as a part of a comprehensive program for homeless areas.

- A. The first offense of drunkenness or disorderly conduct involving drunkenness should be regarded very seriously throughout the city, and a special program of prevention should be installed. Instead of being fined or sentenced to jail, each first offender should be sentenced to an alcoholism-prevention clinic for a period of three days. During this time he would be interviewed by psychiatric social workers, physicians and counselors. The reason for the occasion for acute alcoholism should be ascertained. After all tests and interviews, the patient should be counseled and advised. Social workers should help carry out the program planned for the individual.

	<u>Percent</u>		<u>Percent</u>
Approve . . . . .	64	Strongly approve . . . . .	<u>100</u> 41
Disapprove . . . . .	22	Approve . . . . .	23
		Disapprove . . . . .	12
		Strongly disapprove . . .	10
		Can't decide and no answer . . . . .	15

- B. All heavy drinkers should be considered to be persons afflicted with a chronic disease, not persons given to breaking the law. A program for chronic alcoholics would emphasize treatment and rehabilitation rather than punishment. A welfare unit should be operated in conjunction with the courts before which drunks are brought for sentencing.

	<u>Percent</u>		<u>Percent</u>
Approve . . . . .	86	Strongly approve . . . . .	<u>100</u> 56
Disapprove . . . . .	6	Approve . . . . .	30
		Disapprove . . . . .	3
		Strongly disapprove . . .	3
		Can't decide and no answer . . . . .	9

C. Chronic alcoholics who are not also incorrigible should be sent (with the consent of the man) to a re-training center, instead of being sentenced to a jail term for drunkenness or disorderly conduct. This center would employ the most modern medical, psychiatric, and sociological techniques in attempting to initiate rehabilitation. This could be a single, municipally-operated center or could be a special facility of several hospitals.

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	91	Strongly approve . . . . .	63
Disapprove . . . . .	3	Approve . . . . .	28
		Disapprove . . . . .	2
		Strongly disapprove . . .	1
		Can't decide and no answer . . . . .	7

D. Alcoholics who are discharged from a re-training center should be required to spend several weeks in a "halfway-house" or center where they can be employed at useful jobs and trained by experts in vocational rehabilitation. They have no access to alcohol on the premises but would have access to a normal community. This program is one of vocational and occupational rehabilitation and of reinforcing the re-training center's work. Needed psychiatric, counselling, or other assistance could be continued in this phase. Assistance is given in locating a job upon "graduation."

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	83	Strongly approve . . . . .	54
Disapprove . . . . .	5	Approve . . . . .	29
		Disapprove . . . . .	4
		Strongly disapprove . . .	1
		Can't decide and no answer . . . . .	12

E. Chronic alcoholics who will never be self-supporting again because of age or irreparable physical and mental deterioration should be institutionalized.

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	75	Strongly approve . . . . .	32
Disapprove . . . . .	11	Approve . . . . .	43
		Disapprove . . . . .	9
		Strongly disapprove . . .	2
		Can't decide and no answer . . . . .	14

F. The City should have an integrated program of Health Information for citizens, one part of which would inform citizens about alcoholism, its dangers, and procedures for cure. This information should be a part of the formal training of all junior and senior high school students. It should be available without charge for adult education in factories or organizations desiring to inform their employees or members.

	<u>Percent</u>		<u>Percent</u>
Approve . . . . .	87	Strongly approve . . . . .	<u>100</u> 60
Disapprove . . . . .	3	Approve . . . . .	27
		Disapprove . . . . .	2
		Strongly disapprove . . . . .	1
		Can't decide and no answer . . . . .	11

Detailed Comments on Section II

Following are marginal comments submitted concerning the items of Section II. Additional recommendations of resource persons concerning a program for the treatment of alcoholism are summarized in Section IV below.

Item A.

Strongly approve. Do you realize this starts with youth? Most of the first offenses now are starting with youth. That could all be eliminated. They are not arrested and brought before the court until they are chronic. (Psychiatrist)

Disapprove. That's a waste of money. You can't just put people into treatment. They have to recognize and want help.

Disapprove. Would be a gross waste of time, effort, and funds.

One offense is not evidence of alcoholism.

Approve. It could be done on evenings after his work is done.

Disapprove. Would strongly approve after third offense.

Disapprove. Repeat offense is deemed advisable before instituting above procedure. Perhaps third offense.

Item B.

Thorough screening should be used. Only those with good prognosis should be taken into such a program.



## Item B. (continued)

Strongly approve. I believe a "unit" composed of a social worker and a private agency representative could be used in this connection.

Approve. Persons who fail to cooperate at all will eventually become totally dependent on the State. We should take even drastic steps to shock them into attempting efforts toward self-rehabilitation by stiff jail terms if self-treatment is refused.

Strongly disapprove. The local established welfare agency should be staffed to perform such services at court request.

Disapprove the idea that alcoholism is a disease. It is a moral affliction for which the man is at least partly responsible.

## Item C.

With one qualification. They would have to be screened to see if they were properly motivated and could make use of such a facility.

Approve. Should not be a hospital setting; more of a home setting.

Strongly approve. Residence laws should not be involved.

Approve. Be careful not to add to the man's dependency. His problem might be this, and not alcohol. Alcoholism is symptomatic, not causal.

I would approve that, but I think it's financially impossible. There are too many alcoholics. I understand treatment for chronic alcoholism takes a long time, but it would be wonderful if it could be done.

Disapprove. Our experience has been that little can be accomplished with this type of man unless he is sincere in admitting he is an alcoholic and desires help. Ideally, it may sound fine to help everybody who will agree to take the treatment, but practical experience has proved otherwise.

## Item D.

Strongly approve, if it does not apply automatically to all such persons on discharge, but is done on a selective basis.

They should be under supervision for a whole year after they leave. They need moral support, and it takes time. (Psychiatrist)

Contact should be kept even after the men leave a half-way house, as long as possible.

If a half-way house is used, the alcoholic should be given outside work rather than additional training there. All training should be completed in another unit, prior to the man's coming to the half-way house.

It needs to be off Skid Row, in some other locality. The half-way house has two functions: to get the man off Skid Row and to get the Skid Row

## Item D.(continued)

out of the man. If a man is away from there and doesn't meet his old buddies and has a job, then his chances are much better of staying sober.

This half-way house should also be available for single men coming out of prison and state institutions. It should be a boarding and rooming house. It should help get jobs.

Disapprove. It is elaborate, expensive, and not necessarily effective. You would then need a "three-quarter-way house," then a parole period for them, and then a social worker to visit them every night and bring them grape juice.

## Item E.

Yes, you have the organic brain syndrome. We do institutionalize many of these and they die in a state hospital. (Psychiatrist)

Depends upon what is meant by "institutionalized." Many would need no more than a boarding home or foster type of care. We should not lump them all together as being alike.

These men should not be institutionalized, but may be kept on farms or similar places where they can be supervised but not confined.

Approve, but do not put them in state mental institutions.

Disapprove. Only God knows when a man is an irreparable alcoholic.

## Item F.

Approve, but not strongly - because junior and senior high school students would not find this meaningful. Some might even be attracted to alcohol by this information, or be stimulated to try it.

Sometimes it's best to let sleeping dogs lie. I heard a case where they were talking about marijuana cigarettes. A fellow said, "I heard so much about it, I tried it."

One qualification should be made. We don't know all about alcoholism, its cause and cure. An educational program would have to be carefully designed. It might be sentimental, moralistic, and threatening.

Can't decide. That would compete with the billions of dollars liquor manufacturers spend on advertising. It might be done in the schools, but I doubt if anything would be gained by trying to point that out to grown-up men.

Disapprove. I don't think we know enough yet to be able to tell the citizen how definitely to prevent or cure alcoholism.

Strongly disapprove. This is getting awfully damned close to W. C. T. U.

Section III - Organization of Efforts to Accomplish a Rehabilitation Program

It lies outside the scope of this research program to attempt to make recommendations concerning how the City of Chicago, or any other city, should organize its resources to carry out a program of rehabilitation and provide needed assistance to homeless men. However, just as a "trial balloon" and to stimulate the resource persons to discuss the topic, the following three questions were inserted in the interview.

- A. It has been proposed that a Bureau for Homeless and Transient Men should be established and operated by the City. Its possible functions are those we've just been discussing (rehabilitation of alcoholics, programs of assistance to elderly men, working men, etc.). Do you approve of the establishment of a Bureau for Homeless and Transient Men and its operation by the city?

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	58	Strongly approve . . . . .	<u>30</u>
Disapprove. . . . .	21	Approve. . . . .	28
		Disapprove . . . . .	14
		Strongly disapprove. . . . .	7
		Can't decide . . . . .	14
		No answer. . . . .	7

- B. The program of Alcoholics Anonymous should be made available as a part of the re-training program for those patients who wish to participate.

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	90	Strongly approve . . . . .	<u>63</u>
Disapprove. . . . .	2	Approve. . . . .	27
		Disapprove . . . . .	1
		Strongly disapprove. . . . .	1
		Can't decide and no answer . . . . .	8

- C. The work facilities of the Salvation Army and other charitable organizations should be utilized as a part of the re-training program.

	<u>Percent</u>		<u>Percent</u>
			<u>100</u>
Approve . . . . .	88	Strongly approve . . . . .	<u>60</u>
Disapprove. . . . .	5	Approve. . . . .	28
		Disapprove . . . . .	3
		Strongly disapprove. . . . .	2
		Can't decide and no answer . . . . .	7

Thus, about 9 persons out of 10 voted to continue the work of Alcoholics Anonymous, Salvation Army and other private charitable organizations as a part of a program. A few warned that no man should be forced to accept service from religious organizations against his will. When confronted with item A, the establishment of a central Bureau to co-ordinate the activities of both public and private agencies, a majority favored the idea. Yet this latter item failed to gain the almost overwhelming support that the other items had obtained. One fifth of the respondents disapproved, although only 7 percent disapproved strongly. An additional one fifth either said they did not know or failed to respond to the question at all. As the following comments reveal, many workers in private agencies feared that their role would be lessened if a bureau were established by the city, and others feared that it would be operated ineffectively because it would be staffed on the basis of political patronage rather than professional competence.

### Detailed Comments on Section III

#### Item A.

If the Bureau is contemplated, it should be done with existing planning groups, such as the Welfare Council and with other existing service agencies such as public assistance agencies, health agencies, employment services, rehabilitation services, including both public and private agencies.

The Bureau should be mainly a referral bureau. It would sort these men out, but not do this work on its own.

Something should be done to correlate the efforts of all the agencies working with these men. There should be a better exchange of information so that there could be some conclusion on what could be done to really help a particular man permanently. The way it is now, one outfit works with a fellow and when they have cleared up one of his problems he is back with another agency with another problem. They shouldn't be trying to help a sick man get a job, etc. There should be more effort put into diagnosis and mapping out a plan for a man. There is never a conclusion reached about a case. It's like a treadmill--both for the men and for the agencies.

Strongly recommend the establishment of a Bureau for Homeless Men, which would serve as a clearing agency to determine course of action to be taken for each man, rather than the hit-and-miss efforts of competing private and government agencies dealing with the "problem" piecemeal. To attempt to deal with all as though they were helpless and hopeless is adding to the growing numbers in our dependent population. But it must be operated by people who know what they are doing.

I don't know how to answer. Is this going to be THE Bureau under which you'd have smaller bureaus? If a bureau is going to control everything, then you've got to have all these facilities under the general supervision of one group of people. All this means is that your bureau has to be composed of the right people. I sort of distrust this whole setup.

Approve, provided this means that in carrying out responsibilities full use would be made of existing community planning and co-ordinating machinery, and all existing resources, whether under public or private auspices.

Item A. (continued)

I think it should be a staff with people who have been especially trained in those activities. It shouldn't be a political employee.

I would approve if the Bureau were well organized and staffed with people qualified to do what it is supposed to.

Approve, provided it is done by technically competent people. Otherwise it is a sentimental business and encourages mendicancy.

I would approve of a unit of some type to screen these men. I would approve of a city screening bureau in that area where men could apply. But I think it has to be purely voluntary. I don't think the unit should have any police powers.

Yes, but it should be in the County Department of Welfare.

I believe this should be a joint action between the Welfare Department and the Housing Authority, well coordinated.

Yes, but only if every city operated one. Otherwise transients would flock to whichever city was doing the most.

It should include a procedure and facilities for returning transients to their home community.

I certainly would not call it by this name.

County and city programs should be integrated.

I guess it's inevitable that you have to screen people. It smacks of bureaucracy, but the 20th century has forgotten how to do things without bureaucracy. I hate referral systems. The poor guy has to spend his last 20 cents to go to another agency and then still another.

I disapprove. I'm not for a proliferation of bureaus. They'd appoint another general to be head of it.

I disapprove; it probably would become just another bureau operated by bureaucrats.

Strongly disapprove. These men must have one agency or individual in whom they confide. They do not like to divide this confidence. I believe one capable national bureau could aid present public and private agencies by ideas and suggestions.

I disapprove. Civil Service appointees are not always the best type of person to be working with socially disoriented individuals because many are concerned with obtaining the maximum return for the minimum effort. These people need devoted individuals who can establish meaningful relationships.

Strongly disapprove. It would be direct duplication of work of the public welfare agencies. (New York State)

## Item A. (continued)

I disapprove. I recommend instead development of present resources, with expansion as necessary and a one-man coordinator, directly responsible to the Director of Public Welfare, with appropriate authority delegated.

I strongly disapprove. Such plans should be simply incorporated into the existing public welfare agency. There are too many overlapping agencies now.

## Items B. and C.

That is exactly what we have been doing in our city for many years, and it has been productive of excellent results.

You've got to control the part played by the missions and the Salvation Army. They provide the facilities only for those who confess to their Lord Jesus that they've been saved. For a man to get help from these people is to tell a lie. I think this is a real infringement on a man's personal freedom. I don't think you should have to perjure yourself to have someone help you. The idea of religion and donuts and coffee -- they're going to wake up one of these days and find out it hasn't done anything for them. We don't believe in coercing people to go to church and be helped. I'd have no truck with a referral scheme to send a man to a mission unless he requests it. The right of the individual should certainly be insured at this point. I strongly approve with that reservation -- that the man should have something to say about it.

When the counseling facility is established, there should be a religious department so that people who have problems connected with the church could consult a staff of clergy available to answer questions that arise, based on the recommendations of social workers. The Church could set up camp across the street. One of the reasons we're in the mess we're in is that the secular world decides to take the charity work away from the church.

Suggestions

There is need for involuntary services for rehabilitation, as well as screening and counseling centers. The consent of the man should not be necessary. The program should not depend on voluntary cooperation.

The clergy should be especially trained and involved in this whole program.

I don't think the government of the city should get into the business of providing clothing or feeding.

#### Section IV. Recommendations Concerning Treatment of Alcoholics

Section II, above, was a tabulation of responses to a specified program for treatment of chronic alcoholics, submitted to the resource persons for their critical reaction of approval or disapproval and comment. Earlier in the interview they had been asked the open-ended question:

Do you think anything might be done to help the homeless men who cannot control their drinking? What can be done?

The interviewers made an especially conscientious effort to "probe" this area by encouraging the resource persons to talk extemporaneously concerning what they considered to be a "really adequate" or "ideal" program to help rehabilitate chronic alcoholics. The comments received have been summarized in a series of points, listed below, which seem to represent a core of essential agreement. Following this summary, a series of quotations from the interviews, detailing the specific views of individual persons, has been made.

- Point 1. Chronic alcoholism is a symptom of personality disturbance, of incomplete socialization, or of personal disorganization resulting from unfavorable social experiences. Only rarely is it simply a pastime, a pleasure, or simply a carefree form of hedonistic recreation.
- Point 2. Little can be done to help an alcoholic control his drinking until he admits he is unable to control it, wants help, is willing to accept help, and is motivated to carry out a regimen of therapy. Some experts believe in waiting until a man has reached this point through "going down to the very bottom of the gutter," while others believe a man can be hastened to this point through counseling.
- Point 3. Rehabilitation of Skid Row alcoholics is made serious and different from other forms of treatment for alcoholism because the man has no family to assist and there is no community setting that supports him. In fact, the Skid Row environment is antagonistic toward efforts to stop drinking. In other ways, Skid Row alcoholics may be easier to rehabilitate than other alcoholics because their situation has become so desperate that they realize they need help and are more ready to accept it.
- Point 4. One of the first steps in rehabilitation is to feed and clothe the man, get him living in clean surroundings, and to begin restoration of physical health.
- Point 5. The men respond more quickly and more favorably to a family-like or a men's club-like situation than to a hospital or an institutional atmosphere. The feeling that he has become an adopted member, upon whom respect, affection, friendship, and genuine interest are bestowed, is an essential part of the process of helping him to realize he can "come back" and to resolve to try.

- Point 6. The man must feel a strong belief that he will be able to stop drinking, with help. He must realize that this will require strong effort on his part and that it will not be an easy task. This belief in his own ability often is strengthened by a religious conversion in which he feels he is receiving direct Divine assistance. This belief may also be strengthened by the testimonials of ex-alcoholics (either in a religious or non-religious context), who are concrete and living proof that "it can be done." Counseling may also assist in establishing this attitude of hope, expectation, and determination to try.
- Point 7. The man must be insulated from Skid Row, either by being physically transported to a different place entirely or by being confined, with his permission, to a building where he sees and meets only counselors and other fellow patients, and where he does not see his old drinking cronies.
- Point 8. Treatment for alcoholism consists of helping a man become a teetotaler. There is no such thing as assisting a heavy drinker to "cut down" on his drinking; he can be helped only to stop drinking altogether.
- Point 9. Experts disagree upon the exact formulae or ingredients that should be used in a program of treatment. The programs that have been most successful seem to agree on the following points:
- a. Formal psychoanalysis is prolonged, costly, and much less effective in curing alcoholism than for many other forms of personality disturbance. It is impractical to design a program that makes extensive use of individual psychiatric care. Time, money, and personnel required would be prohibitively large.
  - b. It is also widely agreed that men can be stopped from drinking without removing or fully relieving all of the psychological tensions they have. Many can be taught to "live with their limitations," at least to the extent of holding a job, becoming self-supporting, and independent of public charity.
  - c. A part of the compulsion of drinking seems to be addiction, or quasi-addiction, of the same type that makes it difficult for people to stop smoking, stop over-eating, etc. It is incorrect to attribute to tension and maladjustment all of the intensity of drinking behavior. Once the addictive pattern has been interrupted for a sufficiently long time, there is a chance of attempting to deal with the maladjustment sufficiently to permit the man to reexamine and reevaluate his personal problems and, with group therapy and counseling, to learn to accept or otherwise handle his limitations.



- d. The points of b and c (above) seemingly are the psychological basis for the rather numerous cures that are claimed -- and demonstrated -- by various groups who have worked with these men. A sufficiently large number of men have been cured, without psychiatric or other intensive individual assistance, to make it clear that a "short-cut" is possible, even though it may represent only partial rehabilitation, as viewed by psychiatrists. It is often said that such rehabilitated men are "dry drunks," in that they manifest their tensions in other, though perhaps less debilitating ways.
- e. Alcoholics Anonymous is widely acclaimed as being one of the programs that have been most successful in helping men to stop drinking. Perhaps their program can be made even more effective with the Skid Row alcoholic by supplementing it with measures to take account of the family-less status of the man and the hostile environment in which he is living while trying to make his come-back.
- f. Psychiatrists and others also agree that religious experience, religious counseling, often is an important and necessary ingredient. Almost 100 percent of the Skid Row alcoholics believe in God and have had religious training. For many, this is a promising avenue through which they can be helped.
- g. However, it has also been generally observed that many chronic alcoholics are violently opposed to the program of rehabilitation offered by missions, and either refuse to volunteer or else do not participate wholeheartedly if they do enter a program. Secular programs, which make the services of religious agencies available where they will be accepted, are needed to supplement the activities of the religious organizations. At the present time very few facilities of this kind are available to Skid Row men.
- h. Counseling and frequent discussion with trained and experienced workers who have insight into the experience the man is having as he attempts to retrain himself are essential parts of the program.
- i. Group therapy, the alcoholic participating as one of a group of men all undergoing treatment at once and all sharing their common problem, appears to be an important reinforcing device.
- j. Drugs may be used to deter some men from drinking, and may help break through the addictive phase, but as yet medication alone has not been able to motivate prolonged abstention or remove the factors that lead to resumption of drinking.
- k. The danger of backsliding is very great. It is at peak intensity shortly after formal therapy has been completed and the man again is on his own. At this stage, he badly needs psychological support and a semi-sheltered environment. The "half-way house," a residential arrangement where men can live in comparative freedom, but where all residents are

k. (continued)

ex-alcoholics and where counseling and active programs are still available, is generally thought to be a good bridge over which the man can cross back into normal society.

- Point 10. If the man is to be kept off Skid Row, he must be economically independent of Skid Row. If poverty drives him back, he will become an alcoholic again. Oddly, a man can survive on Skid Row as an alcoholic where he would otherwise starve. Hence, the program must include aid in getting employment and maintaining steady employment. This may require vocational rehabilitation or even sheltered employment for those who are physically handicapped.
- Point 11. Much drinking activity is oriented toward recreational and social interests, even though it may be underlaid by psychological tensions. Rehabilitation must also include the substitution of nonalcoholic recreation for the tavern, and retraining to make use of such programs. The nature of such programs is discussed below in another chapter.
- Point 12. One of the greatest difficulties of rehabilitating the Skid Row alcoholic is to establish rapport with him. He cannot be expected to keep appointments, stay in the same hotel, or even long maintain interest when he is "on the street" and drinking freely. Several experts believe that the "critical time" to offer help to him is while he is in prison, when he leaves, or at a prison farm to which he is sent as a substitute for jail. Under these circumstances, while he is sober and in possession of his faculties, he may be motivated to attempt rehabilitation. Such experts believe that Chicago and other cities are missing a major opportunity by not working with the men while they are in prison, and having a program of rehabilitation available to those who wish it as they come out.
- Point 13. Some programs emphasize education and retraining. They try to teach the basic facts of alcoholism, some of the principles of elementary psychology and psychiatry, and thereby to stimulate self-analysis on the part of the man. This is a major aspect of the well-known "Bridge House" program of New York City. The man undergoing treatment is made to feel like a student rather than a patient.

Some of the programs now being tried suggest that the task is far from a hopeless one, and that continued experimentation probably will provide a combination of measures that will yield a comparatively high success rate, that will not be prohibitively expensive, and that will develop a reputation such that a high proportion of chronic alcoholics will seek help through it.

DETAILED SPONTANEOUS COMMENTS OF RESOURCE PERSONS  
CONCERNING A PROGRAM FOR REHABILITATING ALCOHOLICS

Following is a selection of abstracts taken from the free responses of the resource persons as they answered the query concerning what might be done to rehabilitate chronic alcoholics on Skid Row. A sincere effort has been made to represent every point of view by at least one quotation, irrespective of whether or not it is shared by others. Most of these comments were submitted by intensely interested persons who have had prolonged first-hand contact with Skid Row alcoholics, and hence the information they contain is a mixture of "book learning" with the hard facts of reality. These comments are reproduced here because they illustrate the 13 points outlined above, supplement the program approved by the resource persons as a whole, and also report views contradictory to both of these.

It depends on the individual, whether he wants to control his drinking. If he has a desire to quit drinking, medical treatment, perhaps some psychiatric treatment (the psychiatrists have so far not been very successful treating alcoholics), is indicated. Also organizations like AA, Portal House, clinics for alcoholism, as well as state hospitals could help the man in his desire to control drinking.

Much can be done to help the man, provided he has come to the point where he really wants help. But he cannot be helped to become a "controlled drinker;" he can only be helped to become an abstainer.

Not much can be done for a man who wants to be a heavy drinker except to educate him in the serious health and economic results of such action, and try to re-motivate him. AA or religious conversion and re-motivation are the best helps I know.

Unless a man has the insight to recognize that alcoholism will result if he keeps up his heavy drinking, there is nothing much that can be done until he starts losing jobs and getting involved with the police.

The first requirement of any alcoholism program is a firm policy which delineates for the client or patient that he is responsible for his recovery. All treatment is predicated on his effort, that the rehabilitation people are there to help him to help himself, not to perpetuate the doing of things for him.

Minneapolis is trying to help those who really ask for help. No man can be rehabilitated who doesn't sincerely desire it. We have tried moving men off Skid Row, getting them rooms, jobs, clothing. They drift back; they are uncomfortable elsewhere. But when one of these men walks in and asks for help in getting his life rearranged, if he understands what you are talking about when you mention self-respect as

opposed to self-contempt, we have had good luck in these cases. When there is no motivation, it is difficult to sell the men something they cannot visualize.

Removal from the Skid Row before the rut becomes a grave. This means more than a week in the alcoholic ward; it means a new way of life, removal from old friends and old haunts. It means reeducation, a long enough period of time to prove that he can live without alcohol. Some can, others can't.

I don't know that there ever will be a simple solution, but I think the most constructive step on a group basis is the setting up of an alcoholic farm, where shelter, controlled diet, controlled activities, etc. will give these men the props to lean on. A strong internal group program of activity and individual guidance would provide some of the controls these men are unable to put on themselves. To be effective, I should think a well-planned, well-supervised program is necessary, coupled with legal protections, such as commitment, parole privileges, etc.

We have attempted for years to remove the worst cases (those who have frequent workhouse commitments) by placing them at Mission Farm (a farm for alcoholics outside Minneapolis) where the source of supply is not easily available and where there are supervisory restrictions. It has helped to lower the workhouse commitment rate for most of those individuals.

Chicago has a farm that could be used to rehabilitate 500 or 600 men. It is now used simply as an overflow of the House of Correction. With only a small budget and a modest program that did not "try to do everything for everybody" this place could be used to get a lot of men off Skid Row permanently.

Alcoholics cannot be rehabilitated on Skid Row.

Chronic drinkers should be looked upon as persons subject to serious physical and mental handicaps. Individual therapy, group therapy, sheltered employment, treatment centers, rehabilitation centers, hospitals, "half-way houses" where men could live away from Skid Row and work until they are fully capable of managing their own affairs and have roots established in their communities--all of these are needed.

You must find out what lies behind his drinking. There may be almost innumerable underlying problems. These may be found only by psychiatric examination; then do something about the problem. They need more wholesome environment, more wholesome associates, with recreation, leisure time activities.

The environment should be changed. They should be taken away from Skid Row. They should be given understanding and competent psychiatric and physical help. It is important that they be made to feel that they have a contribution to make to society. They should be helped to get away from a feeling of complete rejection.

You must confine them for treatment, and for a long period of time. You cannot treat a person until he is willing to accept this confinement. (Psychiatrist)

You can do very little until you get the man in prison or in an institutional setting. There is no way to establish rapport. In a Skid Row setting you must conduct any meetings or clinics on a strictly voluntary basis, which the normal alcoholic is suspicious of.

When a chronic alcoholic is drinking, the ONLY place for him is a jail or other custodial retention. Enforced abstinence may be the only way to cause an alcoholic to be able to do a little introspection regarding his problem. His prognosis will be much better if his psychological and physiological condition is near normal. The purpose of the "Iron Cure" is not to punish, but to enforce sobriety long enough for him to take stock of himself and his situation and perhaps resolve to do more for himself.

I have noticed that when these men go to jail for a good stretch, 15 or 20 days, they act like strangers to Skid Row for a while when they first get back. It's as if they got a chance to see how bad it really is. And they don't drink. Then after several days they fall in again. I think that first 10 or 15 days out of jail is the time to work with them. If they could come out of jail into another environment, I think they would make good subjects for cure, because at that time they seem to want to be different and even try to be different, but with nobody to help them or show them how. When we just keep them overnight we are not doing anything for them. His first thought and first desire is to get something to drink when he gets out of here. You can't even speak to him about himself when he's got the shakes. You take this same fellow when he's been dried out and has had some food in him after he's been in jail, his chances of seeing things differently are a lot better. I think this could be an entry point for helping them.  
(Member of a metropolitan police force)

I feel pessimistic about the outcome for alcoholics under psychiatric treatment. The patient has to have insight that he has a problem; then he has to want to do something about it. You would have to put them someplace where they can't get out until they can stand on their own feet. Many would

never come out. It would be like patients in a state hospital. It would be the same as treating an alcoholic in a private sanitarium and would require prolonged psychological treatment. So many people who are not versed in the problem think you can help them with brief talks with them. It is hard to awaken a real honest desire on the part of the man to solve his personality problems, and when there's organic damage done, often your hands are tied--you can't help. (Psychiatrist)

After a fellow is here for a while, I ask him if he goes to church, and we try to get him back into the practice of his religion. If he gets to going to churches, he'll meet people who are different from the man on the street. These men need to get to the point of knowing others and being able to carry on conversations with them. I try to build up their spiritual life. Doing so has kept some men sober and others not. If the men can keep a hold on whatever their religion was, in most cases I find it helps them. It sort of keeps them on an even keel a little longer. . . . So far as jobs are concerned, I advise them against restaurant work, country club work, and institutionalized work. The only fellows they'll meet in these jobs are just like themselves. I tell them they're better off to get a messenger job at \$1 an hour even if it's a struggle. These fellows can't accumulate anything because if they do, they'll see that money and, bang, they're off and running again. . . . They're hard on their fellow men when they're sober, and for the most part they're very prejudiced whether it be the Negro question or the Puerto Rican question. They're anti-Semitic, anti-Negro, anti-anything. If you're sitting downstairs serving sandwiches to a fellow who came in the house starving, somebody will say, "that guy had a sandwich half an hour ago." They're harsh with their fellow men when they're sober. When they're sober, they're awful--maybe because they're selfish. I find them selfish in this respect--a fellow will be here for six weeks and maybe when he gets paid, he'll hand me a \$10 bill. If he's buying things, I figure he's making a cheap boarding house out of the place, and I ask him to leave. These fellows try to avoid doing anything. When they leave here, even when they continue working, rarely do any of them come back--they'll never come back and throw a carton of cigarettes on the table. The only time you'll see them again is when they're looking for something. One fellow says they're a hard-fisted bunch of boys. But when they go on a drunk, they'll spend everything in one night. . . . I feel this way: When they're making an effort to be sober, decent housing and food and perhaps clothing should be provided for them until they get their pay. If they could live in half-way decent surroundings while they're working, maybe they'd stay sober a little longer in-between drunks. If it was possible for the men to develop a whole new outlook on life, that would be fine, but I don't know how that can be done. The little I've read about psychiatric treatment for fellows on Skid Row seems to indicate that treatment is unsuccessful.

You must instill in the man a desire to better himself and try to interest him in joining the Alcoholics Anonymous or some similar organization, encouraging him to get out of his present environment if possible.

A program of hospitalization, Antabuse therapy, Thorazine therapy, and group therapy carried out simultaneously with the Department of Vocational Rehabilitation would probably enable a sufficient number of men to be rehabilitated to justify the cost.

Get the men to AA groups and help get control of their drinking. Get them out of the district. Find the cause of each man's addiction--send him to a psychiatrist if emotionally disturbed. Follow up with social and psychiatric work. Many things must be used--work, rehabilitation. Hypnosis has even worked. Best success has been with AA programs. The men cure themselves by trying to help somebody else. I think AA has not advertised its services and program enough.

Friendship, environmental improvement, good food, clean lodgings, counseling, group therapy--all of these are needed to help rehabilitate the men.

To begin with, they are hungry, dirty, and without a place to stay. So you feed, clothe, and provide them with a clean bed with a group of men of their own kind who are also undergoing treatment. Get them well physically--many have serious diseases. After that you start on the drinking. I personally believe religion is the answer--a faith in God gives them faith in themselves. But lots of them don't want religion. I think you have to have a psychologist help those who don't want religion. A half-way house would work wonders to help keep them going right.

First of all, you have to convince the person that he can come back; that he can be helped. It is my belief that this requires a definite religious experience. Otherwise he will be trying to lift himself by his own bootstraps. With a religious conviction, he develops a faith in the possibility of his changing, and he gets ahold of something above himself. I have seen this miracle work many times. I do not think it can be done by pure casework and psychiatric and medical care. Those are helpful and needful, but someplace, somewhere, the alcoholic man must put his dependence in God before he can be relieved of his drinking.

We believe that if a man is converted and really accepts Christ, he is delivered of his problem of alcoholism completely and instantly. The next day he is a new man. However, to help him keep his conversion, he needs a good sound basis of religious training. It takes almost six months or a year of living in a sheltered existence, such as a mission or a farm that is church-oriented, to accomplish this.

I do not believe that alcoholism is a disease in the same sense that T.B. is a disease. Nobody has to be an alcoholic; this is something a man chooses to do. You don't choose the T.B. Alcoholism is a disease of the mind, body (craving), and heart. In order to cure it you must get it out of the mind, the body, and the heart. This requires a three-way approach--spiritual, medical, and mental. You have to show a man that you are genuinely interested in him as an individual. This interest is something he has not had for a long time. This can be done only by friendly concern for helping him solve his problem (not in convincing him you are going to solve it for him). I believe that the only way to get alcohol out of the heart and mind is through conversion. For a man whose will power is completely shot we must substitute the power of God. Supplement this with the very best we can get in medical treatment, psychiatry, counseling, rehabilitation training, other therapy, and recreation.

I believe there is considerable value in holding to the idea that alcoholism is also related to character defects and to the moral code. Sanctions, both religious and legal, should not be discarded. The help of religious organizations should be elicited. (Psychiatrist)

The first thing is to take care of their immediate temporal and spiritual needs. They need to be taken to a place where they have good shelter and care. Then thought should be given to trying to handle the long-run problems. The treatment they get should be the same as that of a sick person who is unable to pay for his care.

One of the most important things is to feed them and give them a place to stay. Skid Row has a lot of sick men on it--sick because they are not getting enough to eat and the right things to eat.

I have long advocated that chronic alcoholics must be handled in a way similar to that in which drug addicts are handled. Centers must be established whereby the initial referral can be directed and each case can then be studied while the subject is in detention or in a workhouse; and after all facts are judged, a man may be committed either for treatment or to a permanent institution.

You have to understand these men. It's hard not to reject them because they want to be rejected so they can continue to believe that nobody wants them. The men must feel they are participating in the program. A lot of things are being done for these men--imposed by the wise. It's been done by the people outside the community. Something needs to be done with them.

The alcoholic needs to live in a family situation. He needs genuine love. It is a natural human desire to have somebody care for you. The present alcoholism institutions do not help the people. When they get out, these people get drunk again, and there is nobody to care about them. These men have a fear of being rejected. Their feeling of respectability, of being accepted, must be restored.



You cannot "baby" these men--you have to arouse their interest in rehabilitation by suggestion. You have to encourage them to contact AA. You have to work with them to do things for themselves.

A rehabilitation center should be a small place--a house where men who are interested in their problems could come and be rehabilitated. It would provide communal living, a family life in reality, with someone working continuously with the men--counseling them and giving spiritual help. It would be a "jumping off place" to normal living and working. Workers should be trained in the problems of alcoholism--psychiatrists or psychiatric social workers. Also employment counselors who could help employers to understand problems of alcoholics would be desirable. These counselors could help create acceptance on the part of employers of men who are known alcoholics. The problem is to get to the root of the insecurity of each man and to give him the stable equivalent of home life. He should definitely realize that "no monkey business" is allowed--no one can bring liquor into the centers, etc. These houses should be for 15 to 20 men each. Large institutions become quite impersonal.

We should set aside a ward in Cook County Hospital for treatment of alcoholic or mentally disturbed people.

A half-way house, which would have a manager appointed but would be serviced and staffed primarily by the residents of the facility, would be desirable.

In addition to the "half-way" intramural treatment, the patients should be permitted and helped to find outside employment, thereby helping to pay for their maintenance costs while living at the "half-way" house. This practice provides a more gradual return to full community life.

These men should be given basic information on alcoholism, some form of supportive therapy such as AA, and continued counseling for economic and emotional problems. After the initial phase of rehabilitation has been completed, the men should be helped toward a more socialized state and counseled toward intellectual and economic upgrading.

A lot of the men could work two or three days a week, but there are no jobs at their level. If industry were set up to use unskilled or semi-skilled men who were old or disabled, the burden of their care would be lightened.

If a man has a comfortable place to live, the taverns are not so attractive. Economic status is a big factor. Drinking can be controlled medically in some cases. Also, if there were a way to feed the men, they would drink less--as in the old saloon days when free lunches were handed out. . . . It would take thousands of psychoanalysts to untwist the men.

The men could be helped and rehabilitated like the veterans at Hines Hospital. There should be some occupational work, such as wood carving. (There are many programs at Hines.) There should be teachers to keep the minds of the men occupied, helping them to enjoy what they do and learn. Many of the men are just bored. Some can't even read--they go to the reading rooms and hold up a paper to keep warm. Reading classes might well be established for such men. The City should help the men with employment. The private employment agencies take too much--a man gets about half what he is worth. The employment agency checks are also cashed only in certain taverns and hotels. Often the same man runs the employment agency and the hotel or tavern--or his friends do. There is nothing left in the check in the evening--the hotel and tavern get it; the man is back to work the next day and is not free to go where he pleases.

The carefully planned and supervised "half-way house" offers the best promise of a solution thus far evolved.

These men need free medical attention, counseling, and referral sources. This is one of our greatest needs. There should be no regard for residence laws.

Some of the men (a minority) are helped by getting jobs. Many who have worked at casual labor for some time stop drinking so heavily if helped to get full-time jobs.

Training and rehabilitation programs that result in upgrading are needed. Also needed are training for employment in machine operations, vocational counseling, and counseling on problems of social handicaps as well as physical handicaps.

Simple recreational activities, lounging rooms, reading rooms, and so forth should be developed. These would serve to lessen congregating in taverns. More adequate vocational counseling and guidance with good job placements are needed.

Remove the man from West Madison Street. Put him in surroundings where alcohol is not readily available. Provide him with a treatment program--AA type program seems the most effective. You can't really help an alcoholic; he has to help himself--to reach a point where he really admits he needs help and wants it. Treatment should include physical rehabilitation with psychological rehabilitation. In the treatment center the men must be occupied with interesting activities, such as wood craft or metal craft, thereby keeping them physically occupied during treatment.

I have noticed that two deterrents among these men are: 1) the knowledge that continued drinking is a real danger to the state of health and 2) the threat of loss of freedom. Many men quit drinking out of fright when the first drinking-induced disability manifests itself.

A lot of the men on Skid Row are veterans. The City of Chicago could do a lot toward cleaning up its Skid Row by working out a cooperative program with the V.A. I believe that as down-and-out ex-servicemen they qualify under the V.A. program. If they do not, then the Federal Government should be petitioned to include treatment for chronic alcoholism as a part of its veterans program.

More than half of these men have been married, and drinking was the main cause of the break-up of their homes. There should be a program for treatment of alcoholism before it reaches this last desperate stage. We should recognize drinking as a problem among the general population, and accept responsibility for doing something to help those afflicted before they have lost everything and involved their families as victims of their disorder.

By far, the easiest thing would be to try to prevent alcoholism from happening. Once a man has become a chronic alcoholic, it is a very costly process to rehabilitate him. Probably the simplest thing would be to spend the time and money it takes to get the man in a position to hold a job (and it would have to be on a very unskilled level) and not to try to make up for all of his social inadequacies. From a social standpoint, the "cure" lies in prevention, which must start in the home and in the schools. . . . Educationally, mentally, and psychologically these men are the waste material of a free capitalistic system. I think the government should take the capital out of the cast-off. A lot was said against the WPA, but it was a saver in many ways during that period when our economic system cast off millions. I'd like to see a government program, financed on a matched-fund basis, to take care of all people who are at the bottom of the social and economic and skills ladder. It would not be a hand-out program, just a profit-less program helping the men to do the very best they can with what they have and helping them climb higher if they can do so.

It is most important that we introduce in grade and high schools courses in human relations, family living, and self-acceptance. I would recommend not one course, but many. This is far more important than math, English, science, history, etc. It is our hope against delinquency and many other social problems including alcoholism. Chicago should get the Superintendent of Public Instruction going on this NOW.

Stricter enforcement and heavier sentences imposed at the stage of heavy drinking could possibly prevent some heavy drinkers from becoming alcoholics. Some institutionalization at this stage could prevent total institutionalization at the stage of chronic alcoholism.

There should be an evaluation of the present program at the Chicago Alcoholic Treatment Center with the idea of improving and extending it.

We need more positive knowledge about alcoholism. It is a tremendously expensive problem to the taxpayer because it causes unemployment, mental and physical deterioration, and broken homes. Subsidized research into this problem is long overdue.

We need more public education on the nature of alcoholism. There is a vast amount of misinformation. We need a great deal of organized research on causes and cures of alcoholism.

I think one important need is the raising of standards in the area. When standards are brought up and comparable to other areas, I believe a lot of this heavy drinking will cease. I don't know why there has to be such a difference in wages paid to men who live on Skid Row and to men who live anywhere else. I don't understand why lodging houses on Skid Row can continue to operate under conditions that have been outlawed everywhere else in the city. The lodging houses should be modernized and brought up to standards, or else torn down. Everyone just says, "Well, it's Madison Street," and lets it go at that. Also, the area is too concentrated. The time is over when it has to be a labor market for workers. People can be procured from all over the city--and are being. Skid Row is living in the past, and much of the thinking that is being done about "improving Skid Row" is living in the past also. In addition, the agencies that send men to the area should think what they are doing, and seriously consider sending them to other places or making other arrangements. I think also that the people who are responsible for bringing men to Skid Row and making a profit on them should be responsible for alleviating the situation. Employers who owe their existence to these men should be responsible. Too many people are making a living out of this area and are disinterested in the fact that they are contributing to the problem.

The heavy concentration of drinkers in one area intensifies the drinking and the problem. If we concentrate on these areas--breaking them up and discouraging them--we will be eliminating much of the contributing factors of alcoholism.

A complete rehabilitation of properties on Skid Row is needed. Parks, decent places to live and eat, facilities for recreation, and so forth, should be provided. Laws regarding sanitation, fire, the sale of liquor, etc., should be rigidly enforced. Conditions are a lot better than they were, but they are still bad.

The biggest thing to do would be to destroy the Skid Row area. Skid Row creates and perpetuates Skid Row. The men (alcoholics) need care, but they also need family, friends, and a job. An institution cannot supply all of these. No wholesale job can be done. I'm not optimistic.

I do not know why the railroads have to give their checks out in Chicago. The men live and work hundreds of miles out of Chicago. They might get acquainted with different people in the small towns. They might get jobs out there instead of being shipped back here just for the paycheck. The railroads take them 200 or 300 miles away, and then bring them back and give them a voucher. They wait two or three days for their checks, and in the meantime they buy drinks on credit at the taverns. By the time their checks come, they have little left. (The taverns will cash the checks taking out what is owed them.) All of the men's friends know, too, that they have been working and that a check is coming. There is a spree before the check arrives, and what is left is jackrolled easily as the men are usually dead drunk by the time they get their checks.

The evils of the liquor traffic must be controlled. The liquor interests have too much power in politics, both in the state and locally.

Laws should be enforced against selling to intoxicated persons and against selling liquor on Sundays. Laws concerning quality should be enforced.

I think the economic props should be kicked out from under the whole situation. Take the profit out of everything concerning these poor wretches--the cheap labor market and the other forms of economic duress that exist.

Rehabilitation is economically impossible. Besides, the men don't have the urge to be rehabilitated. They like things the way they are. Perhaps they don't like the exact circumstances, but they like the manner of living. You might help a very small percent, but not many. We have had several experiments in Chicago, both by public and by private agencies. They always have a lot of backsliders. If you go on the basis that one man's salvation is worth any amount spent, it would be of value to try to do more than is now being done.

I think there is hope for some, but for only a small percentage. To make a complete rehabilitation would require a long and expensive task. A larger percentage could probably be partially rehabilitated, but would need some supervision or assistance for the remainder of their lives.

For confirmed alcoholics, little can be done, with what is known today, except to provide protective custodial care. But few men really fall in this category. For most, programs which actually go into Skid Row--work programs of the Goodwill Industry type, religious efforts by reputable religious groups, welfare workers who are capable of giving competent counseling and a solid welfare approach to relocating and rehousing the men--will help to make real progress.

Our experience with alcoholics hasn't been too good--even with clinics, hospitals, etc. Alcoholics Anonymous has had more success, in my experience, than other approaches to the problem.

Section V - Recommendations to Assist Homeless Men Who Are Not Alcoholics

The resource persons were also asked to outline what action the city, state, and Federal governments should take to rehabilitate each of the other groups of homeless men who are not necessarily alcoholics. The following comments have been selected as being representative of the information given.

A. Elderly or physically disabled men

The County Department of Welfare should screen these people individually, diagnose them, and then refer them to hospitals, nursing homes, and homes for the aged.

There should be city-wide planning for older people, with well supervised programs for them. The city should look out for the O.A.A. pensioners--seeing that they have adequate housing and food. Now the younger men jackroll the old ones and push them around. An old man falls off the stool when he has one drink, and falls prey to a younger man...Also, the old age pensions should be bigger.

Provide adequate pensions, so a man can choose freely where to live.

A living standard that meets a minimum adequate budget should be provided.

Provide adequate and decent housing in the same homeless men area, with supervision and attention to the hygiene and health needs of the homeless men. Subsidized cafeterias where wholesome, cheap meals may be obtained in a cheerful atmosphere are needed.

Lodges or centers should be built and supervised properly by government, at a cost within the reach of the homeless men's income.

I would recommend a small unit of supervised shelter where each man has his own quarters and where he is required to meet definite rulings of the house for the comfort of all (a situation where there would be freedom of movement--not an institutional setting). It would be a homelike atmosphere. Wherever possible, the man, or his family, should pay. If you had a free program with good care, lots of people--especially the suburban set--would be only too happy to "load papa off" onto the City or Federal Government. Those who are ill or physically handicapped should be given special residences as necessary. Many of these men must be handled with strict discipline, because they are nonconformists.

A home for the men, not too far from the city, with a garden and field would be desirable. The men could work a little, but not overwork.

## A. (continued)

There is a great need for better homes; and these should be homes, not large institutions. They should be smaller homes than the county poor house--which is nothing more than a prison. Social Security laws for the aged should be improved, and provisions should be made for the handicapped.

For selected aged homeless, a foster home placement similar to that for children should be provided with careful screening of both home and aged persons. Follow-up supervision and opportunity to change, cancel, or reassign placements should be part of the program.

These men need a home with therapy. Hobby centers. People trained to help make living more bearable, more interesting. Occupational therapy.

There should be facilities for medical care of chronic ailments. Most facilities for public use in this area are badly overloaded with long waiting lists. The living facilities for these old persons should not be isolated out in the country away from everything.

More adequate recreation, more adequate social life, rehabilitation and treatment for their disabilities are needed.

Senior Centers are ideal; these men should have one.

Employ them. Elderly men in good health make the best employees. The city should be getting employers together, and put the problem up to them. We have never got down to realities on this problem. Employment centers should sort and classify the older men so that they can send out the right man to fit the particular job--free employment service for older men. At present time, employment service does not give these men special attention.

They need a real plan for helping place the men in jobs. But the city is overcome by unions, and even if somebody did devise a program for hiring older workers, the unions would kill it.

Programs for convincing employers that the older worker is valuable, reliable, punctual, safe, skilled. We need a "Hire the handicapped" program.

Get industries opened up to these kind of men. In most places, as soon as you walk in disabled or over 40 they won't hire you.

Sheltered work shops where these individuals could apply their efforts toward partial or complete support.

Remove residence laws for these men.

B. Semi-settled or settled workmen

This kind of man is really a problem. If he stays on Skid Row it is for some reason. He can make enough to get a better place to stay, to go to ball games and shows and live like anybody else. If he is really a good worker he should be able to take care of his own problems and won't stay on Skid Row long.

There should be better places for obtaining employment and places where a man can stay until he gets a job or a better job. Try to eliminate the exploitation that is going on now in the slave markets. Now, a man gets \$1.00 an hour and the employment agency gets 50 cents to 75 cents an hour out of the employer. The labor offices should be investigated by the government, and a better employment system established. Private employment offices do not have fair hiring policies and take too much away from the men.

Make the labor offices more efficient. The labor offices are so inefficient that the employers hire the men directly off the street first. Also, the employers are not fair. They ask for 50 workers and only need 5, so they can choose.

There should be a continuous channeling-off of the ones that want to change. You can't do too much with people who don't want to take the first step. You must have a set-up where it is repeatedly brought to the attention of these men that they don't have to live like this, that simply by really wanting and asking for help they can get it. Lots of men on Skid Row have wrong ideas about the various programs already available.

Before we make substantial investments in treatment or training, there must be careful screening to see if response to treatment is probable.

The objective here would be to make them better workers--to increase earning capacity and to help get them back into normal society.

More adequate vocational guidance and training programs that would permit upgrading and placement according to skills.

Education and direction in diet, recreation, and housing are needed desperately.

As far as possible, these men should be removed from Skid Row.

I don't think it is necessary to do anything for those who are able. If they are not able, we should help them. We should let those who are able work it out for themselves. I hope we are not going to try to help everybody on the street. I believe if they are able to take care of themselves, but live here just because it is cheap, they can take care of themselves after conditions are improved. Many men on Skid Row do not need help.

Clear out the bad elements and you have taken care of the good residents.



## B. (continued)

The area should be cleaned up with the establishment of low-cost room rents on a similar basis as the housing authority.

C. Migratory workers

We should get away from this idea of having a period of residence before welfare can help. We treat people like they were from another country instead of another state.

It would be good if there were a very efficient and organized labor clearing house so that they don't have to wait around to determine whether there are any jobs they can do. . . The present Illinois State Employment services are terribly inadequate. They make no attempt to see if the men can do some other kind of job than the kind they're looking for. But they're understaffed and they either do not or cannot find the time.

Most of these men, I think, have limited mental ability. They have worked out successfully in supervised work programs, such as in workhouses where they are often sent. In my experience, they enjoy the company of other men and are satisfied with this type of living. I believe that projects similar to CCC camps would meet with much success if established, fitting the program to the calibre of men.

The city should provide housing where they could stay until they are at least semi-settled. Then they can move out. Facilities should be available for a period of at least a month.

Keep them working. Help them get a job.

It would help to have a federal program which could utilize men in a vast reforestation program, somewhat along the lines of the CCC camps.

There is a need for financial aid to carry the men until the first paycheck. There is also a matter of clean housing. At present, the cost the men pay is out of proportion. There should be more hostels or shelters--more than one center where clean, warm accommodation is provided. Payments by men can perhaps be made later. . . Also, they should pay reasonable rates.

There should be better education as to job opportunities, and job situations. The farm workers come to the city in winter because they have no place else to go. They should know about the winters here and the cost of living.

Help them find jobs, but keep them from stopping too long. Let them come in and look for jobs, but if there is nothing here for them, have them move on someplace else where there is a chance.

## C. (continued)

How are you going to hold that kind of man down unless you put him behind bars? And the country needs migratory workers. If we didn't have them, you wouldn't have your berry harvest, etc. --at least not as cheap as you do now. The government could see that the migratory workers have adequate quarters and adequate pay. California has done that. (Social caseworker in large municipal welfare department)

D. Transient "bums"

Give them a hot-foot. We should not make a set-up in Chicago that will attract transient bums. They need firm handling. It is a job for the police to say, "Look Buster, go someplace else." You are talking here about a person who does not want to work-- a nuisance. Most of them can not be rehabilitated. We must make them accept work--do something useful. It cannot be denied, they managed to get onto relief or other charity, despite all efforts to remove them or keep them out.

You're talking about the floater. The social caseworker's attitude toward these men is that they are hopeless, but I think that's changing. Something should be done to stop these men from roaming the country. But how can we do it without inviting a lot of floaters from other communities to come here? We need to understand these men better before we can try to help them. Meanwhile, the church organizations do what they can to show an interest in them and try to help them rethink their whole problem and change their outlook.

My policy is simply to refuse any kind of assistance if a person is able to work. Let them starve or leech off someone else until they find it's easier to go to work. There's a point at which you simply have to cut off assistance in order to help them. But this is not realistic. Most bums have mental problems, and you may be asking the impossible to ask them to go out and get a job. They may be completely incapable of facing the responsibilities of holding a job. One possibility is simply put these people to work for the city and to use them as the government did in the various programs in the '30's. City Welfare right now is making every able bodied man work for his minimum subsistence from the city--15 hours a month. When they are in jail, find out what kind of work they can do and give them some training.

The old system of penalizing them for being bums under vagrancy laws is the only thing that can be done. If there is a screening procedure, the mentally ill would be separated and given treatment as needed. The others could be given the workhouse treatment, until they agree to become self-supporting.

Bums are not all alike but are individuals, and individual help would benefit some.

Work camps similar to CCC of former years should be established.

## D. (continued)

When a transient bum comes in contact with the police and court he should be given an opportunity to leave town if he wants to, or find a job if he wants to, but a conditional sentence (maximum) should be imposed if he fails to comply. Attempts should be made to rehabilitate them and opportunities for employment and self-support should be provided for them. If they fail to provide for themselves even by minimal employment, we should support them in institutions like the workhouse where they will find work conditions less agreeable and less profitable. We have had free-loaders in our society since the beginning of time. We have to provide for them, but make them earn their keep by forcing them to do even a little for themselves.

I don't see where anybody can do anything for them. They have no intention of working so long as somebody else will take care of them.

In my experience, if there were really something for them to do they really would not bum anymore. I think a program of helping them get jobs they can do would probably take care of them.

E. Resident "bums"

There are not many of these. There are more drones in the Community Chest than on all of Skid Row.

We need a tremendous strengthening of relief rolls. So many men are on relief who should not be. Maybe they qualify by legal definition, but they are employable and avoiding work with every fibre of their body.

This is a police action completely.

There should be a toughening of official attitude--"No work, no eat!" Police action should be stiffer. There should be an agency to educate the public on why not to give 5 or 10 cent gifts to panhandlers.

Most of these men are either physically disabled or else simpletons (mentally deficient).

Someone who understands people should be put in charge of trying to help these people and make them self-supporting. Perhaps farms should be established to help them work out their problems. The present program of maltreating them as if they were not human beings should not be permitted.

F. Men incapable of being rehabilitated. The following separate question concerning this group of men was asked.

"What do you think the city, state, and federal governments should do for these men who can't be rehabilitated?" Here are the comments received:

F. (continued)

I don't like to admit that there's anybody that can't be rehabilitated somehow. On a practical level, I see no alternative to simply supporting them as we do all the other mentally ill people that we have. They should be supported somehow in a state-operated institution. Since we're collecting people, the local taxpayer should not be responsible for their support. There should be a possibility of organizing an institution that would be self-contained. The food could be raised by the people who are there. The basic necessities could be provided through a basic intramural program. And if they have families, they should be forced to help.

They should be like any other citizen. They should be handled like any other sick person. You're talking about a man who is drinking so much he's too far deteriorated and can't be helped. If he's sick, send him to a hospital; if it's mental, send him to an institution. I don't think there is any particular problem about it.

Most men resent institutional life because it deprives them of personal liberties. Except in extreme cases of deterioration it would seem better to offer such services on voluntary basis.

Often these people can be taken care of in a foster home. They should be cared for in the community outside institutions, if possible.

I believe the men who can't be rehabilitated could be confined in an institution within the city limits and have freedom to roam, compensatory with the individual's responsibility to keep out of trouble and return to the institution. Some have a "cocktail hour." Receiving alcoholic beverages at the institution makes it less compelling for the inmate to escape confinement and over-indulge.

Allow them to take care of themselves (with welfare help) as long as they are able, then provide sheltered care.

They should live in a protected setting, close to a familiar environment.

They should be isolated in a semi-disciplined institution where some gainful work would be provided for them.

The city should have a work farm--a real work farm where a fellow can see that he's accomplishing something. And while these men are there they should be treated like human beings and they should be fed 3 meals a day.

Have a colony for them. Let them work. They can do a lot of useful work. It would be like any other state institution. You'd provide them with clothes, with room and board. But people who have gone that far have to be taken care of as children. But even some of those Skid Row people would prefer their liberty under bad conditions to such a life. (Psychiatrist)

## F. (continued)

Society has to take care of them by virtue of their being human beings. Give them at least food and lodging and let them live like human beings.

If this is strictly a problem of chronic alcoholism--those who are physically and mentally ill--there is no way except to place them in a public institution (either a rest home or a state hospital). Certainly the community is not doing the right thing by leaving these men out on the street where they can't take care of themselves. This is a welfare job. If a man can't get along--if he is too elderly or senile--it seems to me the laws are there to take care of it; we are just not working hard enough at it.

For those who cannot be rehabilitated into regular employment and wholesome living there should be increased facilities for both sheltered employment and wholesome living arrangements. Public shelter with adequate medical facilities, a hospital, and creative leisure time activities, should be made available to those who cannot pass the screening test, and to those who are unable to work, even in a sheltered shop.

Their exploitation should be prevented. Society is responsible for them; society can't treat them like animals and should not let others profit by them.

## Chapter 15

### WHAT MIGHT BE DONE TO IMPROVE HOUSING FOR RESIDENTS OF SKID ROW

What should be done about housing for homeless men comprised an entire section of questions that were asked the resource persons. Instead of dealing with the problem for residents of Skid Row as a single group, they were asked to think of seven different categories of homeless men:

Elderly or physically disabled men;  
Semi-settled or settled workingmen;  
Migratory workers;  
Transient "bums;"  
Resident "bums;"  
Criminals and workers in illegal enterprises;  
Chronic alcoholics.

For each of these groups of men, the respondent was asked three questions:

1. What type of housing should be provided?
2. Who should provide and operate this housing?
3. Where should this housing be located?

The materials of the first section of this chapter are organized around the answers to these questions. Later sections provide additional information concerning housing for particular groups of men or concerning particular aspects of the housing problem. Each summary or analysis of data concerning a particular topic is followed by quotations, abstracted from the interviews, which illustrate both the "pro" and "con" views taken with respect to the various issues, and the reasons given in support of these views.

As was stated in Chapter 14, the resource persons gave their views on these topics before the results of the interviews with the homeless men themselves became available. For this reason, many of them might now vote differently on the various issues concerning housing after reading the other chapters of this report.

## Part I

## NEW SKID ROW HOUSING:

WHAT KIND, BY WHOM OPERATED, AND WHERE

A. Type of housing needed. Resource persons were given a sheet of paper listing each of the following categories of possible housing that could be provided for homeless men.

- a. Apartments, in which two or three congenial persons could live.
- b. Single-room units of hotel-type accommodation, with eating and recreational facilities (somewhat like a typical YMCA). No liquor served on the premises. Bath and toilet facilities shared.
- c. Single-room units of hotel-type accommodation, without other facilities. Units to be maintained at the level of cleanliness and comfort of typical YMCA. Rooms of about 100 square feet in size. Bath and toilet facilities shared.
- d. Single-room units of hotel-type accommodation, without other facilities. Units to furnish bare necessities of decency and comfort, but to be clean and livable. Rooms of about 70 square feet.
- e. Cubicle-type units (large rooms subdivided into sleeping units by fireproof wallboard extending up from the floor about 7-8 feet, open at the top, with protective mesh covering the enclosure). Minimum adequate light, ventilation. Each room with facilities for storing clothes and for sitting.
- f. Open dormitory-type units. Beds located in open barracks-type arrangement, with a metal locker and chair for each bed.
- g. A suitable public institution, such as an old-folks' home or hospital for indigent persons, where physical or mental ailments would be treated.
- h. NONE. No public funds should be spent on housing for this group.
- i. Other. (SPECIFY)

NOTE: Each of the above types presupposes adequate fireproof construction and fire protection, as well as adequate facilities for heating and ventilation. Where bath and toilet facilities are shared, the number of persons per unit would not be excessive.

They were then asked:

"What type of housing would you suggest for each class of homeless person? Feel free to suggest some other type of housing if none of these seems right to you."

Table 15-1 summarizes the responses given. From this table the following points emerge:

(a) An overwhelming majority of resource persons did not favor the housing of elderly or physically disabled men or resident workingmen in cubicle-type hotels. The cubicle hotel is regarded as an obsolete hangover from the days of the gas light and horse-drawn trolley. The units in existence may be tolerated until they are worn out, but to build new ones that would last another three quarters of a century appealed to almost no one. Instead, resource persons favored single rooms; 54% suggested them for elderly or physically disabled men and 75% for resident workingmen. Only 4-5 percent favored the construction of additional cubicle-type places and only 2-3 percent favored the construction of open dormitories for use by men who were not chronic alcoholics, criminals, or "bums." A substantial proportion (20 percent) recommended the construction of "light housekeeping" type apartments where two or three could share expenses and cook their own meals. This aversion to the use of cubicles for housing permanent residents of the city whose primary characteristic is poverty echoes the attitudes of the men themselves. (See Chapter 3.)

(b) For care of elderly men, resource persons favor the use of suitable public institutions, shared apartments, or single rooms in structures with eating facilities. The recommended use of institutions does not necessarily mean "old folks poor farms" or other prison-like commitment of men. In making this suggestion, most resource persons had in mind the extension to elderly familyless men of the modern thinking that has developed with respect to older persons generally.

(c) For migratory workers, the larger proportion of resource persons recommended small single rooms, but a substantial share recommended instead cubicles or dormitories. In recommending single rooms, many suggested small rooms with only the bare necessities. In other words, they saw much less point to providing better quality housing to men who were just "passing through." They clearly intended that rehousing have the greatest benefit for the permanent residents of the city. Nevertheless, they acknowledged an obligation to improve living conditions for transients also.

(d) Chronic alcoholics, if diagnosed as not capable of being rehabilitated, were recommended for institutional care. Alcoholics who were physically sound were recommended to better types of housing as a part of a program of rehabilitation. Theoretically, these men would first go to an institution or to small centers, and then move on to half-way houses that were established specifically to rehouse men emerging from the first stage of treatment. Thus, the resource persons saw the Federal program of housing redevelopment and renewal as providing essential physical facilities for shrinking Skid Row, through rehabilitation of alcoholics and by moving out poverty-stricken nonalcoholics who had been forced to live there. Only a very small minority (less than 10 percent) voted to continue to provide cubicle-type or other minimal housing for alcoholics, without a program to help them stop drinking.

(e) Recommendations concerning housing for "bums" (both resident and transient) varied according to how optimistic the resource person was concerning the possibility of rehabilitating such persons or of making them self-supporting. Those who had some hope of making self-sustaining citizens of the men tended to recommend single rooms and a fairly high level of housing comfort, while those who were most pessimistic about ever being able to change the way of these men would provide only the minimum of comfort and safety that sentiments of human decency require. Open dormitories, as the cheapest and most easily supervised form of housing, were recommended by the largest share of persons.



Table 15-1: The Types of Housing Recommended by Resource Persons for each type of Homeless Man on Skid Row.

Type of housing	Type of homeless man							
	Elderly or physically disabled	Semi-settled or settled working-man	Migratory worker	Transient "bum"	Resident "bum"	Criminal	Chronic alcoholic	
							Not rehabilitable	Rehabilitable
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Apartments for 2 or 3 men to share . . . . .	20.2	10.4	4.3	7.2	1.2	0.6	1.8	5.5
Single rooms, total . . . . .	53.9	75.4	50.4	22.1	25.7	15.4	18.4	35.0
With eating and recreation facilities . . . . .	37.4	33.7	17.2	7.4	8.0	7.4	8.0	19.0
Without eating and recreation facilities . . . . .	11.0	24.5	11.7	6.1	6.7	3.1	4.3	8.6
Bare necessities, small but clean . . . . .	5.5	17.2	21.5	8.6	11.0	4.9	6.1	7.4
Cubicle-type rooms . . . . .	4.3	4.9	18.4	17.2	18.4	8.6	6.7	9.2
Open dormitory-type units . . . . .	2.5	3.1	20.2	31.3	27.0	9.8	9.2	14.1
Suitable public institution . . . . .	27.0	0.6	0.6	4.3	8.6	53.4	54.6	31.3
None . . . . .	...	1.8	1.2	5.5	2.5	0.6	...	...
Other . . . . .	0.6	1.8	1.8	3.1	2.5	2.5	3.1	3.7
Not answered . . . . .	19.6	22.1	20.2	23.3	22.7	17.8	16.0	17.2

Note: The columns add to more than 100 percent because some resource persons specified two choices. For example, some voted "either dormitories or cubicles" for transient bums.

(f) For criminals (most persons had the jackroller in mind) there was strong sentiment for a vigorous program of apprehension and "housing" in jail. Some persons whose special interests lie in the rehabilitation of criminals and the return of ex-convicts to normal self-respecting and law-abiding lives recommended a more liberal housing program as an integral part of their hopes to salvage men who had been in prison.

Detailed comments concerning the kind of housing that should be provided.

General - I suggest public housing; small units (2 or 3 people) with cooking and bathing facilities. Recreation--library and meeting places. Medical facilities. There should be no prohibitions about drinking; grocery stores should be handy.

General - The main thing is to provide clean, low-cost, fireproof housing. I don't think you could get single room units at the price these people could afford.

General - I wouldn't want any cubicle-type hotels. I think it would be a real step ahead in human dignity. Apartments would be good for certain kinds of people.

General - There should be a sheltered workshop and home. It's something like the Salvation Army used to have in their industrial homes. Where the man lives there and works. They're renewing skills. It's something like Goodwill except that Goodwill doesn't have anyplace for them to live.

General - I don't go for these public institutions. If a religious group had these hospitals, it would be better, but what happens in most of these institutions is that they have political payrollers on there and the salaries are so small it doesn't attract the nicer class of person to work on this.

General - I honestly believe that cubicle-type units are the more realistic approach. They can be kept cleaner--freer of vermin. The cubicle type they can put in an exterminating unit once a week without disturbing anything. If needed, they can turn on a hose at one end and wash the thing down. The open dormitory type would never work. There are too many petty thieves. The Salvation Army does have that type, but they have a little different type of occupants. They have the supposed saved men and even there I think they have a problem.

General - The cages are terrible. The one thing men need is privacy. I think it helps the morale, it's cheaper in the long run.

General - The fellows mention to me that they like to be alone, but there's safety in numbers. Open dormitories would make for safety. Nobody would get into these cubicles. I'm in favor mostly of a fellow having a room for himself.

Elderly men absolutely should not have apartments. When men get old or when you have the kind of personalities you have in homeless men, they don't get along too well together. The sleeping facilities should be separate.

Elderly men - There should be some choice. I think it should possibly be an experiment. I think the older men would be more interested in being with someone. They're afraid of being alone because of their health. I'd say on the basis of economy, it might be nice to try apartments.

Detailed comments concerning the kind of housing that should be provided (continued)

Bums - They should be housed in the workhouse.

Alcoholics, not rehabilitable - There should be no single rooms. They can't be adequately supervised, ventilated, and you can't control drinking. For those who have recovered (from alcoholism) and are working, single rooms are okay. But for most of the men on Skid Row these are not good--unless, of course, the men are under strict custodial care, which can't be done on Skid Row.

Alcoholics, not rehabilitable - Those who can't be helped should be put in an institution on a farm where work would be compulsory and alcohol non-existent.

Rehabilitable alcoholics - If alcoholics are sick people, they should be treated like sick people.

Rehabilitable alcoholics - It's better to have two alcoholics in a room, and some private centers. There's not so much loneliness. It works out well to have recreational facilities and their own restaurant after they come home at night, similar to a hotel. It would be more like a family atmosphere.

Rehabilitable alcoholics - They should have combination single room apartments for three or four persons to live together; sort of hotel-type combination.

Rehabilitable alcoholics - Some consideration should be given to their housing as men are being rehabilitated. After coming back, there should be a half-way house or some way they can keep contact.

B. Who should provide the new housing? Resource persons were asked to indicate who should have primary responsibility for providing and operating the new housing to be provided for homeless men. They were asked to choose from among the following categories:

- a. Private hotel and rooming house owners should provide housing which is regulated only by our existing zoning and building codes. This would not involve public subsidies or special government funds.
- b. Private hotel and rooming house owners should provide new or converted buildings in places specified by the city plan commission and regulated by a special health, welfare, and rehabilitation ordinance that would specify the minimum facilities that must be provided, and that would require the management to participate in a possible federal-state-local program of rehabilitation and treatment of chronic alcoholism by providing space for certain rehabilitation programs.
- c. The City should provide new or converted buildings at rates which make such public shelters as nearly self-sustaining as possible. This would be an integral part of a program to rehabilitate present residents of skid row areas and to prevent the development of new crops of homeless men, insofar as possible. The principal objective would be to rehabilitate or cure rather than to recover costs.
- d. The City should provide new or converted buildings owned and operated on a self-supporting basis by the City. These hotels would be required to charge rates sufficient to pay their expenses without subsidy.
- e. Other (SPECIFY):

NOTE: It was assumed that this housing would be of a type suitable to the groups involved.

Table 15-2 summarizes the choices that were made. Some findings are:

(a) For men who are self-supporting and who are not a community problem, a considerable majority of those who expressed an opinion favored management by private businessmen. However, of those who took this view, more than one half also favored a tightening of the laws concerning the operation of these places, and the enactment of special ordinances to assure that businessmen would cooperate fully with municipal efforts to raise the level of living of the men and to assist those who desire an opportunity to escape into a different neighborhood. Such laws would also tend to limit the taking of excessive profits, and force more housing comfort to be provided for a given amount of money.

(b) For elderly men who are dependent and for men who cannot control their drinking, a great majority of those who gave an opinion voted that it is the principal responsibility of the City to take the lead in furnishing suitable housing. In other words, when the results of Chapter 14 are considered in conjunction with the materials presented here, it is unmistakably clear that the resource persons were calling for a total program for familyless elderly

Table 15-2: Recommendations of Resource Persons concerning Who should Manage New Housing for Homeless Men.

Who should manage new housing	Type of homeless man							Chronic alcoholic	
	Elderly or physically disabled	Semi-settled or settled working-man	Migratory worker	Transient "bum"	Resident "bum"	Criminal	Not rehabi-	Rehabi-	
							litable	litable	
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Private owners -- regulated only by present laws . . . . .	13.5	28.8	20.9	9.8	9.2	8.0	6.7	8.6	
Private owners -- regulated by new laws aimed to rehabilitate . . . . .	24.5	28.8	25.8	18.4	20.9	9.2	9.2	12.9	
City -- as a rehabilitation program . . . . .	32.5	16.0	20.2	31.3	32.5	43.6	44.8	44.8	
City -- as a self-sustaining non-subsidy program . . . . .	9.8	8.0	10.4	7.4	7.4	6.1	7.4	6.1	
Other . . . . .	8.6	3.1	7.4	9.8	9.2	15.3	16.0	12.9	
No answer or don't know . . . . .	22.7	25.2	24.5	31.9	30.1	25.2	24.5	23.9	

Note: The columns add to more than 100 percent because some resource persons specified two choices.

Table 15-3: Recommendations of Resource Persons Concerning Where New Housing for Homeless Men Should Be located.

Where should housing be located	Type of homeless man						Chronic alcoholic	
	Elderly or physically disabled	Semi-settled or settled working-man	Migratory worker	Transient "bum"	Resident "bum"	Criminal	Not rehabi-	Rehabi-
							litatable	litatable
Total . . . . .	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
At same site as present . . . . .	20.2	28.2	41.7	42.5	42.9	17.8	18.4	21.5
Scattered throughout the city . . . . .	30.7	42.9	24.5	14.1	16.0	14.7	14.7	28.8
Rural or semi-rural setting . . . . .	27.6	2.5	5.5	9.2	11.0	42.9	39.3	25.8
Other . . . . .	5.5	3.1	5.5	4.3	4.3	2.5	5.5	3.7
No answer or don't know . . . . .	22.7	26.4	24.5	31.9	28.2	25.8	25.2	23.9

Note: The columns add to more than 100 percent because some resource persons specified two choices.

and handicapped men and for a second program of treatment and rehabilitation for chronic Skid Row alcoholics. They see housing as a vital part of the physical facilities necessary to carry out these programs. Since improvement, protection, and rehabilitation are major objectives, they believe it is necessary for the City to design, build, and maintain control of these facilities. Comparatively few resource persons wanted to see the City "in business" as a landlord simply to operate low-cost or non-profit housing without doing anything to rehabilitate or improve the welfare of the men.

Detailed comments concerning who should provide new housing for homeless men.

General - It would be impossible to have private capital provide the services suggested or to conform to present ordinances. The cost of new buildings with the suggested services would be prohibitive for city or private capital.

General - Housing should have all the elements of "personalism" in it as possible. I'm not afraid for the money to come from city and state, but the personnel should be concerned for the welfare of the men, not just an M.A. in Sociology.

Elderly men - There should be some self-supporting buildings owned by the city. I'd like to see them experiment with this because I think it would be more economical.

Rehabilitable alcoholics - Housing should be provided by the public, but run by professionals.

Rehabilitable alcoholics - Housing should be provided by rescue missions with United Fund, city, state, and federal aid.

C. Where should new housing be located? The resource persons agreed less on the exact site for new housing for homeless men than on the two preceding questions. When asked this question, they were offered the following choices:

- a. At approximately the same sites as homeless men areas are now located.
- b. Scattered throughout the city in small units but located in such a way that they are readily accessible to the principal industries that offer employment.
- c. Located in a rural or semi-rural setting (applies only to the groups classed as unable to work or in need of rehabilitation).
- d. Other (SPECIFY)

For elderly men and resident workers, a considerable majority of those who gave an opinion recommended sites away from Skid Row. However, for migratory workers, bums, and for chronic alcoholics who could not or would not participate in a rehabilitation program, there was strong sentiment to keep them localized at the present site of Skid Row. For alcoholics who were drawn into treatment programs or who were institutionalized as being "hopelessly beyond rehabilitation" they recommended sites away from Skid Row, either scattered throughout the city or in a semi-rural setting. Many regarded housing for the rehabilitable group as a three-step program: facilities for giving primary treatment and training in control of drinking; half-way houses where

the men live while they complete their rehabilitation; and, finally, re-entry into the community in residential areas away from Skid Row.

Detailed comments concerning where new housing for homeless men should be located.

General - I can see no reason for scattering these residences through the city. You'd be putting these men into every area of the city. Your neighborhoods would complain. Your property values would depreciate. If you took this new X Hotel and put them out north, housing values would drop so fast it wouldn't be funny. They'd drift back to this area where the hiring agencies are located. A rural area wouldn't work. These are city men. Unless you put them behind an electrified fence, you couldn't keep them there.

General - Placing housing for homeless men anyplace but the present sites would be like spreading the rats all through town.

Elderly men - Housing should be accessible to sources of medical and social services.

Elderly men - This housing should be in suburbia.

Workingmen - When I say that new housing should be scattered around the city, I assume you will have some where they are now. Employment opportunities are here for some men.

Workingmen - Housing should be located near employment agencies.

Rehabilitable alcoholics - Housing should be located near alcoholic clinic with AA available, outside the city.

Rehabilitable alcoholics - I don't think they should be scattered around the city. When they get out, they disturb things. They get into other districts, where I don't think they belong. It's like the police scattering a red light district. I don't know that I go along with the licensing of them in one area. They get into some respectable areas. I think they become a danger to children or to girls or to women or to families. You don't pay any attention to a man if he's lying in the gutter on Madison Street. When you scatter them, you create something and your men can cause neighborhood problems.



## Part II

## PUBLIC HOUSING FOR ELDERLY HOMELESS MEN

The following special question was asked of each resource person:

It has been proposed that the Federal Government, as a part of its housing program, provide funds (matched with local funds) with which to provide low-cost public housing for elderly persons. Assume that this housing would be of a type suitable to the way of life of the groups involved. Under these conditions would you favor the extension of this program to cover elderly homeless men (65 years of age and over)?

An overwhelmingly favorable support was given to this proposal, as the following summary shows:

	<u>Percent</u>		<u>Percent</u>
Approve. . . . .	81	Strongly approve . . . . .	52
Disapprove . . . . .	7	Approve. . . . .	29
		Don't know . . . . .	1
		Disapprove . . . . .	3
		Strongly disapprove. . . . .	4
		No response. . . . .	10

Detailed comments on a program of public housing for elderly homeless men.

Strongly approve. I find these men are suspicious, set, and independent. They would have to be sold on the idea. You would have to arrange it right. Set up the apartment idea--with freedom in it. There should be a rental contract with the right to move. The men should pay the rent with their own money. Under no circumstances should it resemble low-cost housing (public housing).

If the Federal Government provided such a program for elderly people I think it should be available to the Skid Row group. I don't think it would work because they'll require a higher rental than these men can afford. In general, I'd disapprove. It would have to be highly selective--make sure the men are neat and clean and want to live by the standards the other men would want to.

I would approve for clean, sober men. But I would strongly disapprove the extension of this program for nonclean, nonsober men on Skid Row.

I approve only if it excludes the physically deteriorated, senile and other medical problems.

Some public housing agencies are now accepting elderly individuals, but no provision is made by the Federal Government, and insufficient facilities and staff are available locally for special care. If public housing is to assume a semi-institutional role, as appears to be true, facilities and staff must be provided.

Detailed comments on a program of public housing for elderly homeless men.

I would approve of special homes, preferably in rural areas, but not related to alcoholic program on Skid Row.

We've created a monster and we've got to take care of the monster. It should not be self-perpetuating--eventually it should be done away with. We don't want to create a new class of homeless men.

I would not want any building exclusively for male elderly persons. I would have no objection to housing old, including men--possibly two together who have reasonably good living standards.

The whole public housing program of the United States is sick. I feel it behooves people in public housing to examine themselves. It has grown into an institution for non-normal family situations. Anyone who lives in public housing now is non-normal and living with others who are miserable too.

I strongly disapprove of government funds in any of these. I approve of the housing, but I disapprove of federal money being used. I'll also admit that at the present time they're not even making an effort. If you look outside and see these monstrosities that they're building at Mother Cabrini--they'll be slums in 5 years.

## Part III

## SHOULD PUBLIC SHELTERS BE PROVIDED FOR HOMELESS MEN?

One of the earliest forms of housing assistance to homeless men was the erection of public shelters. Chicago had such shelters shortly after the turn of the century. They were revived during the depths of the depression, to house the many thousands of unemployed men who thronged to the city in vain search for employment. The question of whether or not a public shelter should be available (either free or for a very modest payment) has long been a matter about which there is considerable difference of opinion. New York City has such a shelter, and operates employment service, counseling and other welfare activities in connection with it. Drunken men are brought here, and placed in special "sobering up" spaces instead of throwing them in jail. Other cities maintain similar units.

In order to assess expert opinion on this point, the resource persons were asked the question, "Do you think a program of public shelters should be a part of the City's homeless men program?" The results were about two to one in favor of such a program, with a sizable proportion of refusal or failure to take a stand:

	<u>Percent</u>
Approve . . . . .	57
Approve only in depression times. . . . .	1
Disapprove. . . . .	28
No answer . . . . .	14

Detailed comments concerning the question of public shelters.

After casting a vote for or against a program of public shelters, each resource person was asked, "Why do you think this way?" Following are quotations from the replies received.

Approve - Public shelters are probably better run, and better kept than are missions. Shelters should keep up showers and the distribution of clothing.

Approve - Public shelters would fill a void. Here's a conscientious man looking for a job opportunity and he finds himself in a position where he has no funds. There should be someone to help tide him over until his first payday instead of exposing him to the vices of cheap hotels.

Approve - I approve chiefly because the city has considerable numbers of such people who do not prove to be adequate to care for themselves re housing.

Approve - A program can not be adequately staffed and financed any other way. Shelter cannot always be paid for by the ones who need it most.

Approve - It would appear that only through the city taking such action would appropriate housing for homeless men ever be developed, particularly if this housing would have to be subsidized in some way and would therefore be unattractive to private capital.

Approve - The city should provide adequate shelter for all who cannot provide their own proper shelter. This includes those on Skid Row. It is good policy and administration; it is cheaper, more constructive and more humanitarian.

Detailed comments concerning the question of public shelters (continued)

Public shelters should serve as the beginning of the screening process by which all of the resources of rehabilitation could be brought into effect through a co-ordinated and cooperative effort. This would provide adequate facilities for each type of homeless man, the utmost for rehabilitation type-wise, and would eliminate considerable overlapping of activity.... After screening those men deemed suitable for other resources and facilities would be referred, the residue would be allowed to stay on under certain restrictions and conditions.

Approve - The permits for inadequate places should be revoked. These places should be run out of business; they are firetraps. The City should run it in an adequate and safe way.

Approve - The city spends the money to put them in jail; why not spend it to keep them out?

Approve - If we take the profit out of it and do something, it's a fine idea. After all, it is one of the responsibilities of the community. It ought to be run by professional people and there ought to be case work facilities, where there would be employment service and rehabilitation programs. If the men wouldn't work, let them go. If they don't cooperate, don't keep them.

Approve - There are always some persons who will need to be provided for.

Approve - For three reasons: 1. Some men are unable to handle money. 2. There are those who take advantage of homeless men out on their own. 3. Meals could be provided for men who would otherwise not eat, or would eat unwisely.

Approve - In one way or another, e.g. begging, these men are publicly supported. Under a regulated program, those who can be rehabilitated will have the best chance of this being accomplished.

Approve - I'm not thinking of public shelters as a giveaway program. I'm thinking of supervision so we'd know where these people are. As it is now, they can scatter in every direction. If this was provided, everything should be located in one area--employment offices, railroad employment offices.

Approve - Men can be counselled regarding possible rehabilitation, and shelters provide some control re spread of areas.

Approve - The city can and should provide better housing.

Approve - We now have such.

Approve - Some of these men are in their position more because of circumstance than because of their own neglect. If they are not provided with something they would perish on the streets.

Approve - From what I know of the English experience, public shelters have proven workable on the whole. It must be noted, however, that their "homeless men" population is proportionately much smaller than ours.

Detailed comments concerning the question of public shelters (continued)

Approve - Properly administered and with good programs, public shelter would serve an unmet need.

Approve - It is the only way that we will eliminate Skid Row and its objectionable features.

Approve, for the aged and the sick only. If these men are residents, not transients, they deserve consideration and care at least at a minimal rate.

Approve, if under a private agency sponsorship. We have been using such facilities for years and have been quite satisfied with the results.

Approve - Public shelters would prevent certain amounts of exploitation by ruthless elements.

Approve - We could fill a 1,000 room hotel with sober men every night of the winter.

Approve - It would be cheaper in the long run, and more supervision can be exercised of issuing relief to those men than is now.

Approve - The aged or the transient is no local problem but is nationwide and each city of any proportion must realize the problem and make provision for it.

Approve, only on condition that they be controlled under rigid supervision.

Disapprove - It did not work before because it is not a normal way of life. There should be provisions for other types of housing.

Disapprove - Wherever I have seen this in operation it means nothing more than another place to "flop." HOWEVER, if this facility were placed outside the Skid Row area, and IF there was a definite program of rehabilitation, it could be beneficial. But just another place to hole up, nothing doing!

I disapprove, unless it can't be done any other way. If the existing laws were enforced, some buildings would have to be torn down, some businesses would have to close, and the jails wouldn't hold all the prisoners. We're talking about improvement, which of necessity involves a change. In an Urban Renewal project buildings would be torn down, too. Under my plan only those would be torn down which are unusable. They would be individually replaced by private initiative. Municipal lodging houses are cold, impersonal, and do not rehabilitate.

Disapprove - A public shelter becomes a flop house and attracts people who otherwise would remain in smaller communities or homes of relatives.

Disapprove - There would be a tendency for more sponges, particularly by young fellows, who know all the ropes and bum from city to city. They know the schedules of all the freight trains and trucks.

Disapprove - This is dealing with people on the basis of cattle, practically.

Detailed comments concerning the question of public shelters (continued)

Disapprove - You make the people want to stay. There are enough private shelters to take care of the load here. There's no reason for the public to move in and compete with private agencies in a need that I think is met.

Disapprove - This is not necessary under present conditions. During a depression they should be set up.

Disapprove - Public shelters under political appointees lend themselves to much abuse, favoritism, and (under such administration) lack of interest in rehabilitation.

Disapprove - With the exception of the aged, men of the homeless type resent local, county of federal provisions--except as might be had through local private agencies.

Disapprove - We believe that such shelters usually have poor supervision. It is difficult for city government to attract adequate personnel. Selection is frequently on a political basis.

Disapprove - What scares me off is the idea of shelter. I would like to see hospitals for alcoholics--a magnified and tremendous program for treatment and care of alcoholism. For the elderly men I would like to see housing scattered over the city.

Disapprove - Promotes dependency.

Disapprove - Being formerly the hub of the primary labor market, it would attract more men than can be absorbed in industry or seasonal jobs. It would need much supervision.

Disapprove - Costs are too high. Charity organizations are in this field. Should city social workers compete with them? Have we anything better to offer at this time?

Disapprove - If we have men who are not chronic alcoholics and are capable of working, they should take care of themselves. It's not society's responsibility. I'd rather spend the money on employment offices.

Disapprove, because it would attract men from other cities and states.

Disapprove - I worked in the shelter program through the application service in '35 and '36. It was a branch of county welfare where they took in non-residents or people who claim to be non-residents. There were a series of shelters established. In the first place, you couldn't pay a man enough money to operate one of these places nowadays. It's a dangerous job. They took away bushels of knives and guns. They tried to segregate the dirtiest of the alcoholics because even the chronic alcoholics couldn't stand them. We had an influx here of sailors, merchant seamen from every port on the Great Lakes. They claimed hire out here and they gave us more trouble than any group I've ever known. They had a union complaint committee. Then we had the group that was on the move. They were just floating in because they knew other cities wouldn't do anything for them. They said Chicago is a good city. You can get a layover for 2 or 3 weeks. We finally stopped it; they

Detailed comments concerning the question of public shelters (continued)

closed them up in '38. If you started up the shelters again, you'd also have the biggest scream you ever heard from the hotels. You'd say it's socialistic and you're taking the business away from hotels. That's one of the things that brought the shelters down in addition to their being bad. Hotel operators said "We're empty. Why should they put up in these shelters?"

I disapprove. A public reading room or library, yes. That isn't bad. The city appropriated \$20,000 for that and I'm confident that (respondent's mission) could operate that for half. When you get into government, you get into too much overhead. I think that a private concern could do it much better. They don't do anything for the man. They're only interested in the lodging. There's nothing to help rehabilitate the man or help him solve his problem, and he definitely has problems or he wouldn't be there. Then there's too much red tape. Too much involved. It's costly. After all the money's spent, we've done nothing for the man except to give him shelter.

Disapprove - If you had strict regulation of these private places here, that would go a long way toward eliminating the problem. Those people can pay and they should pay.

Disapprove - We tried it and it wasn't too satisfactory. No reason why this can't be handled by public housing as it is now.

Disapprove - "Public shelters" implies to me an absence of treatment; just a roof over their heads. I'd like to see a struggle for alternatives to that, if we could. I think it's perpetuating under other auspices what we already have. What these guys need is treatment and I don't like to see set-ups where treatment facilities are not associated.

Disapprove - Sometimes it's a help in an emergency but you're apt to get them herding people and making emergencies out of everything. If we had the appropriate housing we wouldn't need them.

Disapprove - I can see the establishment of another unbelievable bureaucracy for the spending of public funds. They spend 50¢ to give away 50¢. Churches can do it because they've got people who could do it for nothing.... We would really be encouraging indigent people to arrive in Chicago. This would be particularly true of colored people coming up from the South. When the news gets down South that the welfare here is no longer taking care of non-residents, it will discourage them from coming. There will be no more out-of-state indigents on public funds. I don't think we have any right to encourage people to come here to public shelters unless we have some way of getting them out of public shelters and their normal operation. They tend to encourage people to stay where they are and not try to go very far. I do believe in putting people in a position where they HAVE to do something. Putting a house over people's heads is not going to make them change their way of life. I'm of the opinion that if we had very good social workers interested in working on the scene it might be possible to run such a program.

Disapprove - Missions will do better work with the men.

Disapprove - These tend to be dumping places, badly run and stinking.

Detailed comments concerning the question of public shelters (continued)

Approve - Public shelters would cut down the Skid Row area; there will not be so much congregation.

Approve, provided it has an adequate method of accepting applicants and it is providing rehabilitation for them.

I approve, but only as an interim thing--until other housing gets moving. I think the problem should be attacked forthwith, but interim shelters could be used until housing is set up.

A. For whom (what types of men) should public shelters be used? This question was asked of all persons who approved the idea of a public shelter. The responses were classified as follows:

	<u>Percent</u>
For all who need housing . . . . .	48
Workers--exclude bums or alcoholics. . .	5
Migrant and transient persons. . . . .	11
All who need protective care (usually elderly persons, alcoholics). . . .	27
Other. . . . .	9

From this distribution of responses, it is clear that the resource persons regard the public shelter as an emergency haven for the man who is broke. It takes off the street the man who must sleep in doorways or wrap himself in paper to keep warm on a warehouse floor or in a boxcar. Heavy drinkers sometimes drink until they are completely broke or are jackrolled, and have no choice except to "carry the banner" (walk the streets) all night. Resource persons who favor the lodging house idea, do so on the grounds that it can serve a very real purpose of cutting short prolonged sprees of drunkenness, and protecting the individual from the elements during his sobering-up phase. Meanwhile, it serves as a refuge for the unemployed workingman or "broke" newcomer who is just down on his luck at finding a job.

Detailed comments concerning who should make use of lodging houses.

Shelters should be used for transient men.

Shelters should be used for the migratory or transient worker, residential "bums," and the person temporarily in severe housing and financial circumstances.

Public shelter should be set up for emergencies. They should be for the man who's unfortunate through no fault of his own.

Public shelters should be used for elderly or physically disabled men, migratory workers, transient and residential "bums," and chronic alcoholics.

Public shelters should be used for those alcoholics who can be physically rehabilitated.

Shelters, if they are to be used, ought to be established according to the problems of their inhabitants. In other words, men with criminal records ought to be separated from the elderly disabled and so on. A successful program of this type would require considerable diagnostic ability and classification.



Detailed comments concerning who should make use of lodging houses (continued)

Public shelters should be used for worthy applicants after individual scientific screening.

Public shelters should be used for those that are able to live outside of institutional care, but are economically unable to pay respectable rates for a hotel accommodation. They should also be available for those who require somewhat controlled care and those whose health requires control and segregation.

I approve (use of shelters) for the semi-settled, migrant transient, and resident. The public shelters should be used for all whose problems prevent their living in normal communities.

Shelters should be used for men who cannot be responsible for their own care and for temporary housing.

Public shelters should be primarily for those who can be rehabilitated. The men who can not be rehabilitated should have public institutions provided, and migratory workers, etc., should have the backing and support of private industry.

They should be used for the older (past 55 years) men with physical and mental impairments.

It should be for any man who hasn't got the money to buy a place. You can't let him make a permanent thing out of it, but it could be controlled.

Public shelter should be for diagnostic service--to catch the migratory, transients, and panhandlers. It should be a temporary place to sieve men out to more appropriate housing.

Public shelter should be available for those men who are unable to secure service elsewhere. If they are acceptable for Public Aid, then not. The services should be temporary and limited by nature; they should be properly staffed (social work and medical). There should be a work program. Unless a man is disabled, he should have to work in the shelter or elsewhere--they cannot live free--the work should make possible for the man to pay for his temporary care.

These facilities should be available for any group of men except criminals.

It depends on the individual. Probably after they've been with you for a while and you've worked with them you might send them to another type of institution as they progress toward rehabilitation. There should be a place for a man about to go into DT's. The county will not take them. A man who is a habitual drunk and who has lost his skills and lost the ability to do for himself should be cared for in a public shelter. I think the shelter would do fine, providing it would be adequately staffed and manned.

Shelters could be used for transients and others without any funds--for a limited time (2 days or so)--'til they get adjusted elsewhere.

Detailed comments concerning who should make use of lodging houses (continued)

They should be for any homeless man who has money to pay for such shelters. We're talking about men who can afford to pay something. You wouldn't find people taking advantage of cheap shelter just to go there. You'd find them going elsewhere to have public hotels. I'm not talking about the city going into the hotel business. We're only thinking of those who need such shelter. Of course, there's something still to be said for a private hotel for the type of man who wouldn't be able to pay if conditions were improved. I don't think the cubicle type of hotel comes anywhere near meeting what we should provide for human beings.

B. "Do you think shelters would attract "bums" and derelicts from other cities?" was another question asked of the resource persons. They replied as follows:

	<u>Percent</u>
Yes, would attract "bums" and derelicts. . . .	49
No, would not attract "bums" and derelicts . . .	25
No answer or don't know. . . . .	26

Thus, for each person expressing an opinion, two thought it would attract at least some "bums" and derelicts from other cities. Yet despite this fact, the resource persons generally favored the idea of the lodging house. They voted for it knowing that it would have at least some drawing power as a side-effect, but believed its advantages would outweigh its disadvantages.

Detailed comments concerning attraction of bums and derelicts from other cities.

Yes, but control can be maintained by residence policies and limitation on time (duration) and type of facility.

Yes, and this could be controlled by some residence requirement and other conditions.

Yes, unless definite steps were taken to counteract this.

Yes. They're the smartest people on earth. They know through the grapevine what's going on in Chicago, in New York, today.

Yes it would, but so do private shelters.

Yes. They do move around to the best "Skid Row." In some Skid Rows, you can work spasmodically and get enough to drink. I've met some that came from Denver--it's easier to stay drunk in Chicago than Denver.

Yes, to a degree. Of course, there's a floating element anyway, but if all the cities had shelters there would be a cycle of these men going from place to the other.

No, but they tend to get awfully full of them because of a judgmental attitude of people saying he's hopeless and that's good enough for him, instead of trying to help him out.

Detailed comments concerning attraction of bums and derelicts from other cities

Not in any significant way, but what if it should? We take care of animals in shelters. Why shouldn't we take care of human beings? A person who needs this kind of thing has no way to get to another city. He's the one who gets to the hospital as a hopeless case.

There would be certainly some who would come. I doubt that it would be anything that we could overemphasize. I don't think the trend of floating is as bad as it was a few years ago. I find in the population of this street there are people who are willing to stay longer. We find that around 70% are residents of Chicago. They've been here long enough to establish residence. There would be some, but I don't think extremely so. I think restrictions are designed to discourage. Under the present set-up, you can come here and live as you like if you behave yourself. But you'd discourage them with restrictions because you'd be under a strict living situation.

No. There is no danger if proper discipline is applied.

No. Such derelicts have personal reasons for their location besides availability of such service. Some would have to be "sold" the idea of using such service.

## PART IV

## ENFORCEMENT OF EXISTING HOUSING CODES

Often it has been suggested that housing conditions on Skid Row could be vastly improved simply by enforcing the housing codes that already exist. This would seem to be one of the simplest rehabilitation and renewal measures that could be taken. Yet apparently in city after city the housing codes are enforced religiously except along Skid Row, where special exceptions are made to accommodate the owners of substandard buildings serving this special clientele. In order to find out how widespread this phenomenon is, the resource persons were asked the question,

How strictly do you think existing housing codes are being enforced in homeless men areas?

The tabulated results are as follows:

	<u>Percent</u>
Very strict enforcement . . . . .	13
Generally strict, some laxity . . . . .	20
Enforcement quite lax . . . . .	44
No answer and don't know . . . . .	23

Of those who ventured to answer, a majority said enforcement was quite lax, and another large segment stated there was some laxity. Only about one person in 6 believed there was strict enforcement of housing ordinances in his city. In reporting these statistics, it must be emphasized that this is what the resource persons think exists, not necessarily what actually exists.

Resource persons were then asked,

In what way is it lax?

Those who believed there was at least some laxity in enforcement replied:

Lax enforcement of fire regulations . . . . .	33
Lax enforcement of sanitation, plumbing laws . . . . .	37
Lax enforcement of space, ventilation, light codes . . . . .	23
Lax enforcement of other building codes . . . . .	22

Note: Adds to more than 100 percent because some persons mentioned items in two or more categories.

Detailed comments concerning enforcement of housing ordinances.

The following comments illustrate the kinds of laxity that the resource persons believe exists. They have been selected from interviews received from many cities, and have been disguised so that the city to which they refer cannot be determined.

A. Enforcement quite lax

Cities should enforce existing laws: fire code, building code, sanitation laws, health laws, liquor laws, laws against crime, vice, gambling, drunkenness, and vagrancy. If such were done, such areas would be as different as day from night. There is very little inspection. When inspected, the owner of non-desirable quarters can usually "fix it" with his alderman. There is too much dishonesty, corruption, and graft.

They are so persnickity about the smaller things here, but on Skid Row it's absolutely fantastic. Everything is wrong. You see them and you know why the men drink.

It depends on who's paying off and who isn't.

I don't think any of them have put in the sprinkler system. If a man's paying for a room, he should have a towel, soap, sheets on the bed. It ought to be kept clean, but most of them aren't.

Enforcement is lax in: size of sleeping rooms; number using common toilet, bath, and kitchen; cleanliness of rooms, stairs, and corridors; changes of bed linen and towels.

There is only one inspection a year here by the state licensing representative. The fire department also makes periodical fire inspections and enforces their rules.

These is neglect of cleanliness in the area and a lack of supervision of taverns.

There are no sprinkler systems, bad lights in stairways, and the stairways become hazardous because they are not kept clean. The men are allowed to smoke and drink in bed. You can always pick up a bushel of "bushed" bottles left in the room.

Enforcement is lax regarding standards affecting health, e.g., no rodent control, insufficient heat, and continuing use of condemned property.

Inspectors feel that these conditions can't be helped, that these poor guys have to live somewhere, etc.

Laxity is due to the personnel operating these places. They are of no caliber to be in charge.

We've heard that a room was rented to two different people--one day and one night--and they slept in same sheets. Fire exits were painted over.

A. Enforcement quite lax (continued)

Half the buildings are not fit for human housing. Nevertheless, they have insurance on them. The insurance racket is a great racket. They have kick-backs. They only pay a larger premium and then sit back and don't make repairs. Then if there's a fire, you slip a few bucks to an inspector to say that it was caused by something else. One insurance company insures practically the whole West Side. It's unbelievable what goes on on the West Side.

In regular investigations, in reporting violations, they don't take cases to court, so it must be quite lax.

Some places have rooms with no windows, no ventilation. There's no spraying (rodent and pest control). The fire hazard is high. Equipment supplied is unserviceable (mattresses, plumbing).

The housing does not meet minimum requirements as regards of wiring, toilets, plumbing, heating, cleanliness, fire regulations. There is a lot of pay-off.

Owners are usually allowed to continue unsafe and unsanitary conditions regardless of regulating codes.

It is lax, because it depends how much you offer to the inspector. They are quite rough and strict on the missions, because we do not give them anything.

Vermin and dirt are not regulated by standards. Fire seems to be the only area strictly watched!

There is poor enforcement of health standards such as: bath and toilet facilities; poor ventilation; crowding of too many people into a too small area; many are fire hazards and don't practice other ordinary safety measures.

Housing is sub-standard, unsanitary, crowded, poorly managed, and exploited.

Condemned buildings which do not have a minimum of comfort and safety are being used; because of this, health standards are impossible to maintain.

Existing laws, for one reason or another, are generally unenforceable.

Health measures are not enforced; fouled mattresses, inadequate toilets, inadequate ventilation and air conditioning.

B. Generally strict, some laxity

They are much more strict than they were five years ago. Ever since the X Hotel fire. Since that burned down they've been much more strict. Again it's a matter of cross-the-palm-with-silver deal. Unless it's a serious defect you can usually get it put off. But you can't prove it and nobody will swear to it. One Christmas I saw two plainclothesmen go in an office of a hotel and say, "Where's the Captain's Christmas present?" They don't want to be given a Christmas present; they demand it. That also goes for the Fire Department. The Fire Department is not as demanding as the Police because there's not the contact. They're only called when there's a fire, but when there's a fire inspection I bet the captain gets a little donation.

B. Generally strict, some laxity (continued)

The codes are not too well enforced. Men carry liquor bottles to their rooms. If they raise Cain and someone calls the police, they get put out. Then they get bigger troubles. Sanitation and fire safety might also be defective. ... Clothes should be deloused. They are dirty. There should be public delousing stations, dry cleaning, and laundry facilities.

There are combustible partitions, due to conversion costs. They allow them to operate in temporary violation.

It depends on who the inspector is. Some are strict, others glance over the place. Strict enforcement would be good for safety.

Owners have not complied with sprinkler code. Repairs are not done. Fire exits are not too available.

I don't think they're strict enough. In the past year they've been getting rough. But in some real bad places it's really only been in the past year or so that they've attempted to enforce something. There are some places down there that do a pretty good job of keeping the places clean and obeying the fire laws, but in most cases they're not. These people who own these places are really making money and they're giving nothing in return.

The housing codes are retroactive. Where the building is old, it does not have to comply. There should be better health inspection in regard to ventilation, vermin control, and cleanliness.

The minimum standard requirements do not conform to health code with regard to packing in numbers beyond health requirements.

There is drinking on the premises; unsanitary practices are overlooked or condoned (dirty sheets, torn and dirty blankets, floors and washrooms are dirty; there are insufficient waste containers), and poor heating equipment is allowed in some places. The rooms are dark and airless; they have insufficient air space per man.

Codes are much stricter than in previous years but, probably owing to the fact that much of the housing in these areas is due to be demolished, there is not a constant check on standards to make them 100% compatible with our new code.

There has been adoption of unofficial lower standards for blighted areas.

There have been a couple of fires over there so it must be some laxity. All over the city there is some problem of maintaining consistent, honest, and effective inspection, but it would be even more acute in the Skid Row area.

The housing code is quite strict, but nowhere is it being enforced. Politics enters in here. The codes are not enforced on a friend of a politician.

Enforcement of fire prevention codes are lax. It becomes stricter if some fellows get burned.

Generally strict, some laxity

The existing laws are being enforced properly but they are wholly deficient. They are deficient in that there is no method of forcing a property owner to maintain his property other than resort to court action that may be extremely time consuming and in the long run may not offer a solution. Many owners will pay fines rather than make changes.

Inadequacy of inspection personnel to do job required, causes laxity. They just can't keep up with housing, liquor, health and other violations.

What the inspector sees, is not the way things are done after he leaves.

Enforcement officers are not lax; but, due to insufficient good housing for these persons, we have to accept such as exists.

Health standards are not enforced as are not the safety standards.

Very strict enforcement

Enforcement is very strict because the Mayor insists that we come to these things head on, but it's tough because if a hotel was built 40 years ago in compliance with the law, the owner can take us into court.



## PART V

## GENERAL SUGGESTIONS

To end the section on housing, the resource persons were asked

What other ideas or suggestions can you give us about "What should be done about housing?"?

Following are some of the comments made.

The prime objective of housing is as an aid to rehabilitation, self-support, and avoidance of difficulties which require the use of other, more costly community resources -- police, criminal courts, hospital, etc. Those on Skid Row are there, not by choice, but by necessity -- the end of the row for them. Treatment and rehabilitation is a long-time process with most, and must be individualized because the residents on Skid Row are different, each from the other. Housing should be diversified to fit the needs of the prospective tenants, not the other way around (putting all in the same type of housing). Because of low earning capacity, or unemployability, the cost or rental must be low. For many it will have to be free, probably paid by the relief department. Actually, in the long run, diversified housing, subsidized to enable low rental, will be cheaper.

A change to someplace else would not help. The men come to Skid Row for companionship. There should be, first, improvements in the hotels and cage hotels. There should be all-night watchmen, and 24-hour cold and hot shower service. Many hotels even now furnish towels and soap. For the same money the men are paying now the living accommodation could be much better.

Government money should not be used to perpetuate old buildings and old techniques which have proven useless. If a chance is given to build and create something new, then break clear from the old area and old ties. To place a large facility on Skid Row at taxpayers' expense helps to perpetuate Skid Row. This concentration of homeless men must be broken up!

There are some, with a more highly developed social sense, who prefer housing where they can be near others, but still have some privacy. There are others, particularly homeless men on Skid Row, who would be miserable in any type of supervised housing. They do not fit easily into the kind of places WE pick for them. This is not to be wondered at, when we remember that we have emphasized individual initiative in our culture.

It is a grave mistake, in my opinion, if taxpayers' funds are to be used, whether they come from city, county, state, or nation, to place such a facility in the heart of a deteriorated area, right smack in the middle of the degenerating influences which so complicate the problem. Environment means more than the physical location of the facility; it also involves one's friends and total way of life.

## GENERAL SUGGESTIONS (continued)

It must ALWAYS be remembered that there are few people without some source of income, particularly the aged and infirm. They too value their freedom, their freedom to live in a place of their own choosing.

The unfortunate fact that the Public Housing Program was placed under the Housing and Home Finance Agency has largely negated one potentially powerful existing service. Nearly all these Skid Row residents need decent housing. If social work personnel were manning housing projects rather than being prohibited from being paid from administrative funds in them, and if some real imagination and money were put into the design of them, then their troubled tenants could be helped rather than just housed!

I feel very strongly that federal activity in public housing should be transferred to the U. S. Department of Health, Education, and Welfare with social workers with administrative competence in charge rather than the lawyers and accountants who are now making a sterile, subsidized business out of what is potentially the greatest single contribution to the welfare of disadvantaged people.

It takes more than "housing" and environment to cure this type of person.

Any program for rehousing the homeless men becomes the matter of site selection, which is all-important. No one can force the customers to move to an area they do not like. Skid Row is a city in the city, with its own shops and places for relaxation. It would be a folly to move the dormitories and not the entire complex of facilities.

There should be a large, extensive municipal shelter for the men. It should have private small rooms and a very strict administration both of the men and of the shelter. The shelter should include a good restaurant primarily for the men there (primarily for the transients).

I believe housing should be provided by private operators under strict policing of civic regulations. Structures can be made to appear sightly and well-kept even though accommodations are spartan. Carefully select the city area for these.

We must avoid the isolation of people as "homeless men". The objective of our program is to restore these men in an integrated way to the community.

Public institutions would be the proper place for a man if he gets too old. "Young" fellows (50-60 years), taken into a public institution, get to feeling down. Private agencies ought to be doing more in rehabilitation, but we are financially handicapped now.

Caretakers and keepers should be good, moral, high-standard people. One should not allow criminals or those with criminal records to run housing.

Alcoholic dispensing places and hotels should not be under the same administration. Further, licensing of hotels has to be removed from politics.

## GENERAL SUGGESTIONS (continued)

There is the X Hotel which is a workingman's hotel for the homeless full-time and part-time worker. The rates are very reasonable, the place is clean, and it has Christian supervision. I feel that every city should have a gospel mission. This could be a part of Community Chest or United Fund, with the full backing of the churches. This building should be as modern and attractive as any in the city.

A system of classification must be developed and utilized so that individuals can be cared for on the basis of their condition: elderly "normal" people in private or public housing, according to their means; alcoholics and other mental health cases in institutions or semi-institutions; physically handicapped in other appropriate housing, according to degree of disability. There should be consideration of rural projects along the lines of the "CCC", for able-bodied men who are determined to be unemployable because of past behavior, personality traits, low I. Q., or psychological aversion to work.

I believe that housing, on a more or less permanent basis, should be furnished to only the incapacitated or those who demonstrate a tendency and willingness to be rehabilitated. Those who are able to manage on their own and just won't make the effort should be given little or no consideration.

I am not too keen about the city going into the business of maintaining public shelters as they would be more costly to operate than the social service establishments already existing.

Public housing should be held to a very minimum for those only who cannot afford rent. Clean but no frills. You shouldn't make them happy with it.

We'd like to see elevators for men with fractures, etc. Find a place where a man can get around on crutches and won't have to go outside for meals. The man with pneumonia -- he shouldn't have to tear up and down stairs. They're not sick enough to need convalescent homes with the shortage of convalescent care. If they had kitchens on each floor where a man with dietary restrictions could fix his own food, that would be a help.

I don't think you can offer just one type or one location for a group, but should provide a variety of types in a variety of places.

Rooming houses in the Skid Row area could be improved. The flophouses are better than many rooming houses. The bathing and washing facilities are much better than in rooming houses. The baths serve more. There are more vermin in rooming houses.

Graduating persons from rehabilitation centers to half-way houses to three-quarter houses should be considered as part of the program for alcoholics. And sheltered employment is part of the housing picture. I feel it would be worthwhile to have sheltered employment and sheltered housing for alcoholics. You must make work. Not just that they're taken care of completely, but that they are busy. Men who are handicapped and haven't been able to work for a long time might become self-supporting.

## SUMMARY

There was a little less agreement among resource persons concerning the outlines for a program of housing than there was concerning a program of welfare. Nevertheless, the following points were made repeatedly, and may fairly be said to represent the views of a majority or almost a majority of resource persons at the time of the interview.

- a. The program for redevelopment and housing in Skid Row areas should be an integral part of a series of programs to improve the lot of these men. A separate program must be planned for each major type of homeless man. These housing programs should provide at least some of the physical facilities needed to carry out programs to rehabilitate homeless men or improve their situation.
- b. One of these programs should be to relieve the suffering from poverty and inflation of retired pensioners and physically disabled men who live here out of economic necessity. The Public Housing program should be extended to cover these men, and living units suited to their needs should be constructed away from Skid Row.
- c. A second program should be a renewed effort to get the alcoholic derelicts and the perennial drunks off Skid Row and into treatment centers with a program designed especially to meet their needs. These represent a comparatively small percentage of the men, yet create a substantial police and other expense and are responsible for much of the official apathy and neglect that result in present undesirable living conditions. Chronic alcoholics who are irreparably damaged beyond the point of rehabilitation should be institutionalized on farms or other places of minimum security where they can live without mistreatment and at minimum expense to the taxpayer. Alcoholics that have rehabilitation potential should be counseled into volunteering to join a rehabilitation program. Men in such programs should be rehoused in rehabilitation centers located off Skid Row. After primary treatment they would go to half-way houses, and finally on to regular housing.
- d. After removal of elderly and disabled men, chronic alcoholics and other defectives, the housing in the entire Skid Row area should be upgraded and renovated. The existing housing should be forced to conform to minimum building codes of the city or else razed. Officials should cease making Skid Row the exception to enforcement programs. A special investigation should be made into the repeated charges by resource persons that standards of enforcement by police, fire, and other municipal agencies should be raised, to eliminate graft, "Christmas presents," "fixing" citations for violation through aldermen, etc. Removal of elderly men and alcoholics would leave vacancies, so that a substantial number of substandard units could be razed without inconvenience.
- e. Sponsor the construction by private businessmen of single-room units with minimum adequate facilities that would permit workingmen to live in greater privacy, comfort, and security than previously. Some of these new units should be scattered in appropriate neighborhoods throughout the city.
- f. Establish a lodging house for transient and destitute men. Operate this as a screening depot for helping rehabilitate and assist men who need help. The staff should be professionally trained and selected on the basis of civil service examination and professional experience. These workers must be realistic and hard-headed enough to maintain high standards of conduct, cleanliness, and with a minimum of attraction of human parasites from other communities.

g. In the long run, cubicle hotels, if allowed to exist at all, should be modernized and greatly improved with respect to safety, cleanliness, ventilation, and size of cubicle. They would be available for commercial use by migratory workers, "bums," heavy drinkers who refuse to join in rehabilitation programs, and any workingman who for some reason does not wish to live in a low-cost single room. This would still leave each city with a "Skid Row" but it would be a Skid Row in which a maximum effort had been made to improve the living condition of each different group to the extent feasible with the funds available and the kinds of problems involved.

h. The entire housing program would be closely coordinated with a welfare program, which in turn would represent a combination of the resources of public and private agencies.

## CHAPTER 16

### WHAT MIGHT BE DONE ABOUT SKID ROW: VIEWS OF THE DIRECTOR OF THIS RESEARCH

This chapter is really an addendum to the preceding research report. It sets forth ideas for a program to eliminate Skid Rows, ideas which evolved in the minds of the director of the research and his associates as the study progressed.

In formulating and presenting these ideas, the research director is not adhering to the strict research role which he prescribed for himself and his associates in the collection and analysis of the factual data. Here he ceases to be concerned only with what is and why, and asks himself and his associates what, in their judgment, can and ought to be done about what is. The ideas do not constitute, therefore, in any sense, an official set of recommendations by the National Opinion Research Center, the Chicago Community Inventory, or the administrative and advisory staffs of the research, but they are presented here at the request of these sponsoring groups.

This research has shown that, although the populations of Skid Rows are highly complex, containing many persons who do not pose serious problems, their peculiar character lies in the fact that they do contain, in relatively high proportion, persons characterized as "hopeless cases." The various types of hopeless or near-hopeless cases have been enumerated and described in the research report; they are:

- a. The family-less, indigent, elderly person
- b. The unskilled, family-less, physically disabled worker
- c. The family-less chronic alcoholic
- d. The bachelor laborer, operative, or semi-skilled worker who is either afraid of, or else dislikes, normal neighborhood or family life, and who prefers hotel life instead
- e. The family-less unemployables -- the "dregs" of the labor market
- f. The family-less, idle or shiftless person who does not want steady work
- g. The severely neurotic or marginally psychotic individual who has fled from normal social life and is "hiding out" to escape detection and possible institutionalization.

The problem, then, of "getting rid" of Skid Rows is one of materially reducing society's output of such persons, of reducing their number through effective rehabilitation procedures, and of providing acceptable institutional arrangements for taking care of cases that cannot be prevented or rehabilitated. This states the problem in basic, long-range terms. Our research suggests, however, that there are intermediate steps which could be taken and which, if taken, would reduce Chicago Skid Rows to manageable size and give basic remedies an opportunity to operate more effectively.

Before any such intermediate steps are suggested, it should be pointed out that this research, together with other well-authenticated factual knowledge, has pretty thoroughly undermined one fairly widely accepted rationalization for the continued existence of Skid Rows: Skid Row has often been called an important economic asset to the community. It has been said to provide a necessary pool of laborers who are readily available on a day-to-day basis and are willing to work on menial jobs at necessarily low pay. The need for such a labor pool may have been substantial and important at one time, but nowadays Skid Row's economic functions are comparatively minor and unmistakably non-essential. It is true that one can scarcely eat in a famous-name restaurant in Chicago's Loop without eating vegetables cleaned and pared by a Skid Row kitchen-hand and being served on dishes washed by another Skid Row kitchen-hand. But it is also true that the entire Skid Row labor force could disappear from the economic scene and scarcely be missed.

Chicago, and every other major city, now has a surplus of unskilled, able-bodied young males who are seeking work and who are unemployed. These are Negro and white migrants from the South, and from Puerto Rico. All labor shortages are in the middle and upper occupational levels, not at the bottom of the occupational ladder. The fact is that the "spot job" employment agencies at the present time could fill the vacancies or job contracts with young migrant workers without using any of the men from Skid Row. Likewise, many railroads have found that Skid Row gandies are inferior workers and involve more trouble than "home guards" hired from

small towns along the lines to be maintained, and have closed their Skid Row hiring offices. The activities of the State's Casual Labor Office and the employment-getting activities of missions and welfare organizations are aimed at obtaining preferential hiring for homeless men and hence are a form of sheltered employment.

Even if it were true, as some hotel and restaurant owners claim, that Skid Rows bring to Chicago a large volume of business (the railroad and other employment payrolls), the cost to Chicago of maintaining Skid Row and of providing police, fire, and housing inspection, and other municipal services, far exceeds the actual revenue received in taxes from Skid Row establishments. The cost is, perhaps, three to four times the revenue.

Thus, when viewed from an economic viewpoint, Skid Row must be regarded as a liability to the community, with no necessary or indispensable economic function. This does not mean that the economic activities of Skid Row are "bad" or should be abolished; in fact, these economic activities have the effect of making a large percentage of the homeless men minimally self-supporting, thus keeping them from being direct full-time dependents. But it does mean that if Skid Rows were abolished, there would be no strong economic forces that would tend to re-create them, except those economic forces that operate on the fringe of the outer limits of legality and morality. The notion that Skid Rows are economically necessary, or even advantageous, is fallacious.



ELEMENTS OF A PROGRAM TO ELIMINATE SKID ROWS

Skid Rows in American cities can be abolished without undesirable consequences and at a cost that is not prohibitive. Such an accomplishment, however, will require a considerable change in viewpoint and municipal philosophy with respect to Skid Rows. Specifically, it will be necessary to substitute for the present "containment" policy a positive program of removal, rebuilding, rehabilitation, and prevention. Such a program could be scheduled as a major five- or ten-year program. The savings in municipal expenditures ultimately would pay for most of the program. The balance could be financed from new taxes and other revenues derived from converting present Skid Row land to more productive uses.

The major elements of such a program may be listed under twelve major headings, as follows (each item is discussed in detail in the following pages):

1. A program for disposing of Skid Row housing which, though not absolutely prohibited by existing municipal building codes, is in reality unsafe, unhealthful, and sociologically undesirable. Such a program should have two phases: Phase I, a phase of "shrinking" Skid Rows; and Phase II, a phase of completely replacing the diminished Skid Row (remaining after Phase I). This will involve the provision of housing units that serve the needs of the elderly indigent and other erstwhile Skid Row residents on a quite different plane.

2. A program for institutionalization of men who are mentally ill, seriously ill with chronic diseases, or too senile to care for themselves.

3. A program of minimum adequate care for dependent elderly persons who have no families, and housing for workingmen who are not alcoholics.

4. A program of medical rehabilitation to restore disabled men to the labor force, or to improve their employability and earning capacity. A special group here would be those workingmen who, through congenital defect, accident, or "acts of God," are unable to support themselves at a minimally adequate level of living.

5. A program of occupational rehabilitation and training to improve the capacity of Skid Row men (especially younger men) to become self-supporting or to upgrade their earning power.

6. A program of treatment for Skid Row alcoholics, where the persons to be treated are not willing to cooperate voluntarily, or who are willing but who refuse to be helped or fail to be helped by programs operated by Alcoholics Anonymous and missions. This program would supplement the present activities of these private organizations and would make use of their services.

7. A program of sheltered or semi-sheltered employment for men who cannot obtain regular or steady employment in the competition of the open labor market, even though they desire it.

8. A program of rehabilitation and assimilation for ex-convicts who have served their prison terms, and who have no families. Skid Row now collects a considerable number of such men because there is no adequate program for helping them re-establish themselves.

9. A plan for detection and management for ambition-less or idle men who do not want steady work and who are not handicapped but who merely use the Skid Row welfare facilities to gain a parasitic livelihood.

10. A program for the rehousing and socialization of asocial, anti-social, and semi-neurotic persons who prefer to live in isolation.

11. A program to eliminate economic exploitation on Skid Row, and to assure a type of service that would help homeless men to get off Skid Row rather than make sure that they stay there.

12. A program of preventive action, with special emphasis upon dealing with newcomers to Skid Row.

The foregoing program elements are admittedly interrelated and overlapping. But they differ in their foci and in the methods and procedures required for their accomplishment.

ITEM 1. Renewal of Skid Row Housing: Phase I.

A redevelopment program could be launched immediately to dispose of almost two-thirds of the present housing on Skid Row. Not less than fifty per cent of all cubicle-type hotels and many seriously substandard and overcrowded old rooming-houses could be demolished immediately without any noticeable effect upon other neighborhoods in the city.

The entire South State Street Skid Row, penny-arcade, and "honky-tonk" area could be completely razed. Vacancy rates are extremely high in this area. The North Clark Street Skid Row is so small in comparison with the large slum that surrounds it, and in comparison with West Madison Street, that it could be razed at any time, either as a separate action or as a part of a larger clearance program. In addition, every one of the older cubicle-type hotels on West Madison Street that were built or converted before 1915 could be torn down. These hotels, with their narrow stairways, their small, box-like, dreary lobbies, their wooden floors made into tinder by years of oiling and use of oil-base sprays, are beyond salvage as residences. These buildings are in sharp contrast to the larger cubicle-type hotels built or converted in the 1920's, which are of fireproof construction. Most of the older hotels have old-fashioned heating systems and are on second and higher floors above other commercial establishments that are capable of starting fires. No amount of remodeling could ever convert them into safe or comfortable living-quarters. In the event of a fire, the men could only stumble blindly through the narrow passageways which lead by crooked paths to stairways that are not really fire-protected, or to fire-escapes located in such a way that exit must be through a window. In general, these are the medium-sized and smaller hotels. In order to "make ends meet," the managers of them tend to hire the fewest and cheapest possible personnel. Clerks are often men from Skid Row who drink on the job and have only a foggy notion of what to do in an emergency. The owners or managers of many of these hotels are interested strictly in short-run or immediate profits, and do as little as possible to make their places livable.

In the process of taking the interviews with the sample of Skid Row men, I visited every hotel and made an informal tour of inspection of almost every one, often by simply coming back at a later time and renting

a room, which I sometimes occupied for the night. I am speaking from first-hand experience in claiming that there are no less than fifteen or twenty cubicle-type hotels in Chicago which "nobody would miss" if they were torn down (except as an improvement of Chicago). The result of razing the most substandard and hazardous structures would be to reduce the number of cubicle hotels to about ten or fifteen larger, newer, more fire-resistant units that are clustered together within a few blocks on West Madison Street, in adjoining streets, or on the very edge of the Loop. Although some of these largest units are not very well operated (from the viewpoint of customer welfare), this situation would be remedied by some of the other items in the program listed below.

Such an action would have the immediate effect of greatly reducing Chicago's Skid Row area and would concentrate the Skid Row population into fewer units and a much smaller space, that could be more easily improved. No housing shortage would result if this action were accompanied by a program of removing all public-welfare recipients and elderly pensioners from cubicle hotels. Given the present high vacancy rates, the removal of Chicago's subsidy to the cubicle-hotel business would provide the needed freeing of whole structures for demolition. This program should be accompanied by a very rigorous inspection of rooming-houses in the Skid Row areas, with condemnation procedures taken against the several places that are nothing but filthy and unhealthful holes into which elderly pensioners and outpatients from Cook County Hospital are crowded. Since these places, too, derive a major share of their income from the City, it should be an easy matter to refuse to certify a residence for a recipient of public welfare where the lodging-place has not passed inspection by both the Building Department and the Board of Health. Since the rooming-houses provide quarters for only a few men each, and are interspersed among other land uses, the worst ones of them could also be torn down without any external effect.

This Phase I program could provide much land for industrial districts, near-the-Loop residences, low-cost public housing, and other more profitable uses. Since Chicago now has used up most of its vacant land, future economic growth must come from absorbing wasteful uses, such as the sprawling and unnecessarily large Skid Row. This phase could be accomplished unilaterally;

it does not require cooperative action with any welfare agency except the Cook County Department of Welfare in rehousing welfare recipients. It is completely "safe" in that no other community in Chicago would be "threatened."

ITEM 1. Renewal of Skid Row Housing: Phase II.

Accomplishment of Phase I would dispose entirely of two Skid Rows in Chicago and would reduce the size of the West Madison Street Skid Row by about one-third, without affecting other parts of the city. But it would bring only a moderate improvement in the housing situation of men who continue to live on Skid Row. A second phase, which would rehouse all Skid Row men or greatly rehabilitate present housing, is called for. This second phase would be more complex and far less autonomous than Phase I. It would have to be closely integrated with a welfare, health, and rehabilitation program. The types and amounts of housing provided would have to be geared to this program. Some housing units must provide facilities for accomplishing special purposes, in addition to providing residence. In some cases housing calls for institutionalization. Thus, the redevelopment of Skid Row forces housing experts to work with other experts, and the success of a program to rid cities of Skid Rows will depend upon how honestly and fully this collaboration is carried out.\*

A summary of the housing action involved as Phase II is as follows:

- (a) Expansion of institutional facilities to include family-less men who are found to be mentally ill or incurably ill from chronic diseases that are highly debilitating.
- (b) Housing for dependent elderly persons or family-less men who are unable to support themselves at a minimally adequate level because of disability.
- (c) Housing for chronic alcoholics from Skid Row undergoing primary treatment for alcoholism.
- (d) Housing for alcoholics after the phase of primary treatment is completed. Some persons call these "halfway-houses."

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\* In the remaining sections of this memorandum, the housing aspect of each program will be discussed.

- (e) Housing in low-cost, single rooms for family-less workingmen -- those who do not drink, or those who have successfully mastered a drinking problem, but who prefer to live outside usual residential areas or in a hotel-like environment. This housing would concentrate on helping men improve their situation and rise to better living conditions.
- (f) Housing for men who are destitute, either because they refuse to participate in other programs, are incorrigible bums, or are temporarily desperate because of emergencies. This might include the conversion of one or more existing cubicle hotels for use as a charitable or low-cost lodging-house, possibly separately operated by the Cook County Department of Welfare.

As will be made clear in the detailed discussion below, these programs are not all necessarily public housing programs. With proper administration, private welfare organizations and private businessmen can accomplish much of this housing program.

ITEM 2. Institutionalization of Psychotic Persons, Senile Dependents, and Chronically Seriously-Ill Family-less Men.

Skid Row houses many men in very poor mental health, and a small but important percentage of these are cases that would be institutionalized if they lived in other neighborhoods. At the present time these cases come to official attention only if they are picked up by the police (and not always then), or if they are on the welfare rolls and a social worker diagnoses their difficulty. Power to recommend a psychiatric examination, with appropriate legal proceedings, should be given to the director of the Reading Room, the chief interviewers at Cathedral Shelter, Salvation Army, Pacific Garden Mission, Christian Industrial League, Travelers Aid, and Catholic Charities. It is not necessary to set up a new screening organization; these established agencies know about these men but are not presently empowered to act or encouraged to make a recommendation. As homeless men deteriorate to the point where they become cases for institutionalization, they must rely upon the charitable organizations. Case-workers in the existing organizations serving Skid Row have the insight necessary to detect suspected cases and to make a recommendation for investigation. Since this arrangement

requires no new facilities or personnel, it is inexpensive. In the first six months of operation, this program might bring into public institutions three hundred or more defectives. Thereafter it would bring in only the new cases, which would be much fewer in number.

ITEM 3. Care for Dependent Family-less Elderly Persons, and Housing for Workmen Who Are Not Alcoholics.

The present research has shown that Skid Row houses many victims of poverty in old age, who live in or near Skid Row for economic reasons only. The resource persons favored overwhelmingly taking advantage of the Federal Government's program of housing for the aged to improve the residential situation of this group of men (see Chapter 22). This action could be taken in conjunction with Item 4 and Item 10. It is doubtful whether an "old men's home" would appeal to these men, whereas an all-male rooming-house or hotel with light housekeeping rooms, where younger, orderly men stay, would be a better arrangement. A YMCA-type structure, with enough rooms to be operated on a self-sustaining basis, with an adequate staff and with auxiliary recreation and other facilities suitable for elderly men, is indicated. Low-cost meals of wholesome, well-prepared food should be available (but not mandatory except to persons on disbursing orders), and within the budget of individuals on Social Security and other pensioners and welfare cases. Under no circumstances should alcoholics or mentally deranged men be allowed to remain, because these categories of persons are most disliked by elderly men and workmen.

This facility should not be located in a family residential area but should have a setting similar to Skid Row -- located between commercial and industrial activities. The reasons for preferring a non-residential location for such units is that these men would interact little with family persons, and many of them have personality disorders of a mild or moderate type which make them poor risks in neighborhoods where there are children. In any other type of location they would have an independent blighting effect. Yet they should not themselves be blighted by being forced to co-exist with the alcoholism segment of Skid Row. Facilities should definitely be moved away from concentrations of taverns and a drinking culture. Such structures should have offices for one or more case-workers,

who would handle the welfare needs of the elderly men (as well as other residents), and make necessary referrals. Space should also be provided for religious services, recreation, and other activities contributed by private religious organizations and other charitable organizations. A part of the program would include sheltered or semi-sheltered employment at some nearby points for men capable of being partially self-supporting. The State Employment Service might sponsor a campaign to help obtain employment for such men.

Although the general setting for such a place should be non-residential, there should be a small park or other available open space of adequate size, and there should be good access to other parts of the city by public transportation. This facility need not be operated as a public or governmental institution. Private corporations, operating under a charter that limited them to a small margin of profit in exchange for assistance in furnishing buildings and facilities, could be tax-paying and competing units. There should, however, be strict regulations concerning the standards of cleanliness, comfort, sanitation, and service to customers. No taverns should be allowed to be a part of such structures, and the welfare and recreation spaces should be maintained without charge either to the City or to the patrons. Certainly one such unit, located between Cook County Hospital and a nearby industrial area, should be tried on an experimental basis.

This program, also, would be comparatively inexpensive, because Federal funds are available to bear a substantial segment of the cost, and because the cost of welfare services under such a set-up probably would be cheaper than at present. Present operators of Skid Row facilities should be allowed to bid for the privilege of operating such facilities. In fact, Chicago has one company that already has such a favorable reputation among Skid Row men for being honest, humane, and fair that allowing this firm to operate the first facility, under municipal regulation, would help greatly in assuring its success.



ITEM 4. Medical Rehabilitation of Indigent Disabled Workingmen.

A selected list of disorders and remediable disabilities that commonly afflict low-income workingmen should be drawn up by medical authorities at Cook County Hospital. Welfare workers -- in both the public and private organizations -- should be informed that men with these disabilities may obtain treatment at public expense, in order that their earning power might be increased, or that their descent into a dependent status might be checked. This list need not be long or overly generous. It would include such things as hernia, all fractures and wounds, however received, surgery to correct organic malfunctioning, and medical care for kidney stones, gallstones, etc. Inasfar as possible, this should be treated as an interest-free loan, to be repaid in earnings after the man has returned to work. The State of Illinois should be asked to provide a revolving fund for this purpose. Such a program should include men with families as well as family-less men. Meanwhile, private charitable organizations that operate medical facilities should be encouraged to expand their activities to do more medical rehabilitation work, and be given whatever assistance is possible for this purpose.

Facilities should be established for providing medical aid to men dangerously ill, but who do not have welfare status. The many deaths from pneumonia and similar disorders should be greatly reduced by making emergency treatment more readily available to indigent men. The current experience of the Salvation Army with its West Madison Street clinic, and of the medical activities of the Pacific Garden Mission, should be studied, with an eye to expanding and enlarging them to handle simple rehabilitation as well as first-aid-type situations. The more complex disorders, of course, require more elaborate medical facilities.

ITEM 5. Occupational Rehabilitation and Upgrading.

A high percentage of the younger men on Skid Row indicated a desire for training that would allow them to escape from the ranks of unskilled labor. Their aspirations were, in general, modest and realistic. At present there are facilities for giving occupational rehabilitation to disabled persons. At very low cost, experimental evening classes in automotive mechanics or other desired topics could be initiated at a nearby high-school.

Certificates of training completed could be issued. The City of Chicago has already supported a policy of adult education to increase literacy. This could be expanded to include elementary training to increase earning power of workers without skills. If existing public education facilities were used, an experiment of this type could be tried for the cost of the teacher, materials, and overhead. Widespread publicity should be given to such a program, with counselors at all present centers recommending to their younger clients that they enroll. As described below, this could be a part of the rehabilitation of chronic alcoholics.

ITEM 6. Treatment for Skid Row Alcoholics.

This is a complex topic, and one about which only experts should have an opinion. Comments by resource persons (see Chapter 22) suggest very strongly, however, that a low-cost program of treatment for Skid Row alcoholics might be carried out with moderate success. This program should not be aimed at the cooperative man who joins Alcoholics Anonymous voluntarily, but at the uncooperative chronic drunk who repeatedly is arrested. It should be frankly experimental, trying in combination all of the things that show promise but which are inexpensive. It might consist of sentencing chronic alcoholics to thirty days in a special section of the Bridewell, where social workers would try to motivate them to undergo further treatment for alcoholism while they were being "dried out" and brought back to good physical condition. The fact that men who have been jailed try spontaneously to "stay on the wagon" was reported by resource persons as a possible entering wedge. The "treatment center" for such men might include employment, attendance at occupational training classes, and instruction in simple terms about the nature of personal disorganization. The men would be induced to do basic self-analysis of a type popularized by Karen Horney, the psychoanalyst. After a second thirty to sixty days in such a program (possibly also of a confinement nature), they could be placed in a sheltered halfway-house, provided employment, and given support by a resident welfare worker. Alcoholics Anonymous and the various private welfare groups should be allowed to participate, to the extent that these groups recognize the psychological aspects of the problem and would regard religious activities as one part of a larger program, but not the entire program.

Chicago is fortunate in having Raymond Hilliard, the principal welfare expert in the design and operation of the famous Hart Island project in New York City. Mr. Hilliard has had more experience in treating Skid Row alcoholism than any welfare administrator in the nation. If the city were to make the facilities available in the Bridewell and were to use the City Farm as a halfway-house, it is entirely probable that the Welfare Council of Metropolitan Chicago and Mr. Hilliard could enlist the cooperation of the various private welfare organizations to staff such a program, at least on an experimental basis for two or three years. With only a modest effort by public and private agencies, a pilot project could be started in Chicago. As Chapter 20 of our report makes clear, Chicago's Alcoholic Treatment Center is oriented (as perhaps it should be) toward drinkers who have families, or who have not yet left their families. It is strongly urged that the Metropolitan Welfare Council, the Cook County Department of Welfare, and the Mayor explore the possibility of immediately starting "classes" of fifty chronic uncooperative family-less alcoholics through such a program, keeping careful records of the results, and varying the program in the light of experience, and using all of the advice and help they can get from existing agencies. Meanwhile, all of the present agencies should be encouraged to continue their programs. This would simply be an additional program to strike at the "hard core" of chronic alcoholism. This program should not be one of "coddling"; the men should be made to earn their keep by working while in the program. Programs of this type are now operating in Scandinavian countries. The fact that these countries have no Skid Rows is due largely to the fact that chronic alcoholics are undergoing enforced treatment in which they earn their way. If Chicago's program were brought to a point where two hundred alcoholics (one hundred in the Bridewell and one hundred on the Farm) were undergoing treatment after the two hundred to three hundred institutional cases had been removed, Skid Row would take on a completely different character. Within the course of one year, eight hundred to one thousand men would be affected, and within a three-year period, a systematic effort would have been made to give every Skid Row alcoholic a chance to reorganize his life without waiting until he "hit bottom" and had broken his health before making the effort. Men who stay "dry" after completing the program might be lodged in the men's residences described in Item 3. As has already been pointed out,

at the present time vast funds are being spent for police, inspection, feeding, and clothing alcoholics, with almost no expenditures to try to make them self-supporting again. The mere fact that two hundred of the repeaters are undergoing enforced treatment at any one time would cut the number of daily arrests by perhaps twenty per cent or more, and within three years the program could cause the volume of municipal expenditures of this type to be greatly reduced. The prospect is certainly worthy of a trial.

ITEM 7. Sheltered Employment.

This is a movement that is gaining favor in the care of elderly persons. It should be expanded to include men who are disabled or handicapped and also men who have been chronically unemployed through no fault of their own.

ITEM 8. Assimilation of Ex-convicts.

As penitentiaries turn out larger numbers of parolees, the problem of readjustment becomes greater and greater. Much of Skid Row's recruitment comes from this source. If Skid Rows are to be eliminated, more effective and more encompassing welfare work must be done, both while the man is still in prison and after he is released.

ITEM 9. Treatment of Bums.

Probably the last residents of the cubicle hotels, if the present program were put into full effect, would be this group of men. The recommendations of resource persons for their treatment are described in full in Chapter 22. As other uses for cubicle-type hotels decline, perhaps some type of minimum rehabilitation and retraining program with strict discipline might be initiated in one of these units.

ITEM 10. Rehousing Social Isolates.

Throughout this study it has been made clear that many men on Skid Row are not drinkers but are just "odd personalities," who prefer a life of isolation from "normal" society. They work and support themselves and are not a welfare burden to the community. These men could be rehoused

in the structures described in Item 3, or in low-cost rooming-houses or apartments built as a part of slum clearance. Little, if any, welfare work needs to be done for them, although improved recreational facilities might cause some of them to be assimilated. In making provision for these men, it should be kept in mind that many, if not most, have personal problems or are psychological deviates in comparison with the general population. Although it should be easy for those who desire it to pass into other neighborhoods, whatever housing is provided for these men should not be forcibly scattered throughout residential areas generally, for the reasons given in Item 3. All of this housing need not be new housing; some of it could be converted from existing buildings in areas undergoing redevelopment.

Item 11. Removing Economic Exploitation.

There are several practices on Skid Row that are aimed at taking unfair advantage of the men because they are in no position to "bargain," to defend themselves, or to demand justice when their rights as citizens are violated. Although many businessmen and other persons who have had contact with Skid Row men have great sympathy and understanding and try very hard to assist them, there are some employers who exploit these men even though they know that it only causes the men to sink deeper into a hopeless situation.

The fact that some of these practices are carried out by very large corporations and are perfectly legal does not alter the fact that they are anti-social in nature and are in the same category as child-labor practices and other unscrupulous activities that have long since been made the subjects of special legislation. Some of these practices have existed for so long on Skid Row that not only the persons doing the exploiting, but also politicians, and even the men themselves, have lost all sense of the inhumanity involved and have come to regard these practices as "the way things are done."

Following are some of the practices that degrade the men and thwart their efforts to leave; efforts should be launched to get each of these things changed:

(a) Private employment agencies charge exorbitant prices for jobs. It is not uncommon for these agencies to take one-third or more of the wages a man earns. Since the man is in the lowest wage-bracket already, this means that he can earn barely enough to keep himself -- and then only by staying on Skid Row. Steady jobs often must be bought by a large payment in advance. Since steady jobs pay weekly or bi-monthly, it is hard for a spot-job worker to accumulate enough capital both to pay the labor office's tribute and to sustain himself until his first pay. In a situation where there is widespread and chronic unemployment, as Skid Row has been shown to be, the men are desperate and are willing to strike almost any kind of a wage bargain. From one point of view, the action of some labor offices on Skid Row forces the men into a position of semi-slavery. They are crushed to a point where they have no choice but to work on terms dictated by a few powerful labor offices. The men told stories of kick-back arrangements between employment offices and the personnel offices of large firms employing large numbers of casual laborers on an intermittent basis, and of being fired from "steady" jobs after a short time in order that the labor office could again fill the job and again collect its fee, all under pre-arrangement with the employer. There seems, also, to be widespread favoritism in furnishing work, and this is not unrelated to kick-backs the men must make to office clerks and other personnel in order to get a job almost every day.

There is considerable evidence, gathered in the process of this study, to show that similar activities take place in the awarding of jobs as operatives and lower-grade white-collar workers. It is said that in many employment offices the job-givers draw no salary except the "cut" they get from the pay of the people they place, and that they have a great deal of latitude in working with employers' personnel officers in establishing hiring arrangements. It is quite possible that the situation on Skid Row is only one example of a widespread condition that is in need of social legislation to protect the citizen from monopolistic practices.

These comments do not apply to all employment agencies on Skid Row. There is, however, enough evidence to warrant an investigation of the entire field of private employment firms, perhaps by the U.S. and State Employment Services.

(b) Arrangements should be made to see that Skid Row men get Social Security credit for every hour they work. Currently it is very common for a man to work at jobs that clearly are covered by Social Security, but for the employer or the labor office not to bother making the deduction. It is obvious that the one group of men that most needs the protection of Social Security, both because of the high rate of breakdown in health and the inability of the men to save for their retirement, is the group of Skid Row men who work at "spot jobs" from which they accumulate no Social Security reserve. This forces onto public-welfare rolls large numbers of men who otherwise would derive some pension payments from Social Security. Aside from housewives, who are notorious for not deducting Social Security for domestic help, probably the greatest concentration of non-compliance with the Social Security laws takes place in Skid Row areas. So common is this practice that even the State Employment Office for casual workers does not always enforce these laws with employers who hire day laborers through them. It is difficult to comprehend why very large and wealthy firms, who regularly pay the employer's share of Social Security taxes for their full-time employees, begrudge the few dollars and the comparatively small amount of paper-work it would take to see that the truckful of ragged men they pick up on West Madison Street have minimum protection when they are no longer able to work. The only explanation seems to be that "it just isn't the custom" or "it's too much bother."

(c) Tie-in arrangements between hiring agencies and hotels should be abolished (you must sleep in a particular hotel at a higher rate per night than is charged regular cash patrons if you want a job or a steady job). Sometimes this takes place because the employment office also owns a hotel on Skid Row -- or a family member does. At other times it is simply a collusive arrangement between an employment office and a manager of a hotel. Usually, it is the smaller, less business-like labor contractors and the poorest, most dilapidated, and most disliked hotels that do this. If a man objects to this loudly enough, and goes to the State Employment Service, he can get his deduction for hotel room refunded. (Our interviewers mentioned persons who had done this.) But most men do not know their rights or do not have the courage to defend them, since the job is very likely to end as soon as a rightful protest is registered. It is regrettable that, although

individual instances of this type are corrected rather promptly when brought to official attention, nothing is done to make certain that similar actions will not take place in the future. The two or three employment agencies most famous for this work-housing exploitation were believed to be operating in this fashion routinely throughout the period of this survey.

(d) The loaning of money on Skid Row often is done at exorbitant rates. Interest rates of fifty per cent for as little as three days are common. Money is loaned or advanced against pay-checks by pawnshops, taverns, and restaurants. A man who expects to be paid at the end of the week may draw on his wages in advance at a rather standard rate of two dollars for three. This includes the cashing of "identities" of gandy-dancers, whereby a man is sent back to Chicago to collect his pay and is given an "identity" (identification payroll slip) which he must present at the railroad office. There is often delay and week-ends without pay between arrival in Chicago and receipt of money. At certain established places (sometimes not unrelated by blood or marriage to railroad employment-office workers) identities may be cashed at usurious rates. Or they may be cashed at a tavern when a man begins to drink. The bartender deducts the amount spent, the intoxicated gandy-dancer never remembers how many drinks he had or gave away, and has nothing but the bartender's word for what happened. He wakes up penniless and must live off the mission soup-lines until he can get shipped out again.

(e) Railroads and commissaries should change their hiring, operating, and payroll systems. Throughout this study it has become clear that the hard core of excessive drinking on Skid Row centers around the gandy-dancers and freight-yard workers. The present system of recruiting, operating, and paying railroad maintenance workers only stimulates and perpetuates this drinking culture. It makes it impossible for a railroad maintenance worker to aspire to a normal life and forces him to seek his social life amid the Skid Row surroundings. Thus, the railroads have helped to institutionalize Skid Row. If there were once advantages to this type of arrangement, they have diminished over the years, as Skid Row has become less and less a habitat of able-bodied men, and more and more a refuge for unfortunates who have no other resource. It is also doubtful whether this is the only workable or feasible way of doing it. In view of the very high costs involved,



both to Chicago as a city and to the men themselves, an effort should be made to inform the railroads of the effects of their policies and to solicit their cooperation in working out a new employment arrangement that is less conducive to degeneracy. These comments apply to the commissaries that hire off Skid Row as well as to railroads. The simple act of moving the railroad employment offices into the heart of an industrial district where there are no nearby residences, of paying the men by check, and of hiring along the line instead of off Skid Row, would do much to prevent serious exploitative abuses.

(f) The minimum-wage laws are openly broken, both in spirit and in deed, along Skid Row. Some industries, such as bottle, pasteboard, and other scavenging companies, manage to get their work done at rates as low as fifty cents an hour, by declaring that the men who pull the carts or push the baby-buggies are independent operators. Skid Row hotels and restaurants also pay very low rates for night-watchmen, janitors, and dishwashers. By making a tie-in arrangement between salary and room or board, the man gets paid less than the minimum wage, even if the combined value of his pay-check and benefits were valued in cash. Unfortunately, this also includes the employment offered by many missions. Often the men the missions employ are not sinners or drunks but are just desperately poor. While they are getting "rehabilitated," they refinish furniture or do other productive work at substandard wages. Of course, some of these men are "mission stiffs," who do as little work as possible but maintain a highly religious attitude in order to be allowed to stay. It is admittedly difficult to draw precisely the fine line between charity for the poor and economic exploitation of a man who has been unemployed to the point where he is penniless, discouraged, and frightened. A careful review of minimum-wage compliance should be made of every hotel, restaurant, mission, employment agency, and firm known to employ numbers of Skid Row men. In this connection it should be pointed out that many employment offices pay the men exactly the minimum wage (or a nickel an hour more) and then pocket the difference between the minimum wage and the higher rate that the employer actually pays.

(g) Some police officers on Skid Row are charged by the men with jack-rolling after arrest, or with using threats of arrest as a means of extracting money from them. Also, they are charged by hotel owners with withholding police service unless they are paid an established fee for each "call," and of expecting gifts at Christmastime and other occasions. A confidential report of the information obtained is being forwarded to the City of Chicago. It is recommended that these allegations be explored and conditions rectified insofar as the allegations are found to be correct.

(h) The laws concerning the sale of liquor to intoxicated persons should be enforced, with severe punishment administered to taverns which fail to comply and police officers who fail to enforce. The present practice of selling liquor to any man who "has the price of a drink," or who is able to lift a drink to his mouth, encourages jackrolling, leads to brutal beatings and death for many men jackrolled, and hastens the development of heavy drinkers into alcoholic derelicts. Along West Madison, North Clark, and South State Streets, there is a highly efficient system for collecting the men who collapse from drinking and installing them in the police lockup, even though the men have broken no statute, but nothing is done to punish the tavern that openly breaks the law by selling the last few drinks that brought about this condition. Many experts along Skid Row agree that dozens of men would go home and "sleep it off" if they were refused further drink after they showed definite signs of intoxication, but taverns help them go the whole way so that they end up in jail with all of their money gone, often seriously injured, or dead in the morgue. Many of the deaths from pneumonia are traceable directly to exposure while drunk. As is true of so many other things, it has been possible for so long on Skid Row to drink oneself into unconsciousness, that police, bartenders, and everyone have come to accept it, even though most taverns in other places have learned to comply with the law. One aspect of the problem is that there are too many taverns on Skid Row, and many of them need to sell every drink they can in order to pay off all their obligations and still show a profit.

(i) Hotels and police should be prevented from brutalizing the men. The bouncers in some hotels are heartlessly cruel; they beat, kick, and bully men who are intoxicated, or even elderly men who do not do as they say. In

making arrests, some police officers are very handy with their clubs. Some men interviewed showed broken wrists or stiff shoulders and other deformities which they claimed were inflicted by police either at the time of arrest or in the station. Many of the hotel clerks are ex-alcoholics, and it is often said along Skid Row that nobody is more cruel to, or more intolerant toward, a drunk than an ex-drunk.

Special training needs to be given police officers, and police officers with sadistic tendencies should not be allowed to be on duty in areas where they encounter alcoholics. If it is true that chronic alcoholics are sick men in need of professional help, brutal treatment by police and hotel clerks only worsens their condition. The kind of physical mistreatment that sometimes takes place is reminiscent of the tales of beatings of mental patients in asylums before the 20th Century. There are some persons in the world who seem to enjoy inflicting severe bodily pain to other human beings without risking retaliation. Unfortunately, some of these persons sometimes get jobs where helpless alcoholics come within their grasp. It is also unfortunate that no Skid Row man feels that he dare complain about this, either in court when he is tried or by filing a complaint, for he is deathly afraid of the worse beating he would receive thereafter. Also, who will take the word of a confirmed drunk over that of a police officer or a hotel clerk?

(j) A careful health and sanitation inspection should be made of hotels and missions. This should include an inspection of mattresses, cleanliness of cubicle walls, and the germ-breeding capacity of damp, non-ventilated cubicles that never see sunlight. Unfortunately, some of the dirtiest, most undesirable sleeping-places are in missions. (Also, some of the cleanest places are in missions.) Severe action should be brought against all hotels and missions which operate establishments that are a threat to health, that are dirty, vermin-ridden, and that use dirty linens and blankets. It is unavoidable that shower-rooms and toilets in cubicle hotels will be filthy at certain times of the day, because of the present large number of men per unit allowed by building codes, but in some places there is little effort to combat this unfortunate situation by more frequent and more thorough cleaning.

(k) Prostitution in taverns, hotels, and other places should be more conscientiously controlled. Often prostitution is a normal part of operating a Skid Row tavern, where "B"-girls encourage the men to do more than just drink. Some Skid Row hotels or hotels in nearby areas knowingly harbor prostitution activities. In some hotels the cleaning-maids are said to do a lively business. Since the parties involved are among the least informed and least health-conscious segments of the population, Skid Row prostitutes are almost certain to have one of the highest rates of venereal infection in the population. The intersection of Madison and Halsted Streets, and the adjoining blocks, are especially less all-male in their evening activities.

ITEM 12. Prevention of Skid Rows.

In the final analysis, if men can be prevented from arriving at a state where they land on a Skid Row, the best type of Skid Row control will have been achieved. The results of this study have shown that the number of men arriving on Skid Row would be reduced almost to zero if the following preventive steps were taken:

(a) Support of indigent elderly pensioners at a level of living greater than that afforded by Skid Row. Such a program would shut off the flow of victims of poverty to Skid Row areas.

(b) Patch the existing loopholes in the Social Security, minimum-wage, and pensions-for-industrial-accidents laws, and develop a system whereby pensions would be inflation-free, so that at retirement every workingman who had not been a "bum" would have a minimally adequate level of living assured him.

(c) Provision of needed medical care. This would not only cause Skid Row to shrink, but would greatly diminish the supply of men arriving at Skid Row.

(d) Rehabilitation and employment programs for handicapped persons.

(e) All programs that tend to promote mental health would tend to reduce the Skid Row population in two ways: first, they would reduce the number of men who seek refuge in drinking; and, second, they would reduce the number of men who flee from regular society to spend a life of comparative isolation.

(f) A program of detection and treatment for alcoholism in its early stages. The views of resource persons on this subject are reviewed in Chapter 22.

(g) Any program that would tend to reduce crime and other forms of social deviation would reduce the flow of persons to Skid Row. Moreover, any program for improving the rehabilitation of criminals and correction of social deviation during youth or early adulthood would have the same effect.

(h) Improving the quality of housing in all slums and widening the gap between Skid Row existence and other forms of living, will make the Skid Row type of life even less appealing and will intensify the desire to live away from such areas.

#### CONCLUSION

The program outlined above tries to take full advantage of the many splendid efforts that are already being made to care for and rehabilitate Skid Row men. It calls for a little closer cooperation and coordination of these units and asks them to be a little less doctrinaire in their approach to helping the Skid Row men solve their problems. It would, however, preserve the integrity of each unit, looking forward to a day when the program of prevention and treatment would be so effective that all would be forced to close their doors. This is one field of operations where success by a welfare agency means its demise. This program also calls for a greater cooperation and coordination between the functions of municipal planning, housing, and redevelopment, and the activities of welfare agencies, both public and private. Finally, it calls for an aggressive effort to try to correct the situations that create Skid Rows instead of just trying to police and preserve existing Skid Rows. Instead of deliberately planning and designing for a new Skid Row area as an inevitable part of the American metropolis, plans should be made to make Skid Rows unnecessary. The fact that this has already been accomplished in the Scandinavian countries, where there are also severe problems of drinking, unemployment, and dependency, proves that it can be done.