

Helen Boardman
An Oral History Interview
Conducted by Elizabeth McBROOM
July 11, 1988
In Mrs. Boardman's Home

McBROOM. Helen, have you been interviewed before about your career for any other oral history enterprise?

BOARDMAN. Not for anything connected to this. I was interviewed by Patty Wheat for the history of Parents Anonymous, which was then published in *Hope for the Children*.

McBROOM. *Hope for the Children*; that wasn't on tape first though?

BOARDMAN. It's in the paperback.

McBROOM. Yes, but I mean the interview itself.

BOARDMAN. The interview itself was taped.

McBROOM. So as far as you know will it be available to us for these archives?

BOARDMAN. I don't know. Patty has moved to Kentucky so I really don't know.

McBROOM. Are you in contact with her?

BOARDMAN. Occasionally.

McBROOM. We could follow through on that and correspond with her and inquire about that tape.

BOARDMAN. But I have the book.

McBROOM. You have the book. I am going to ask you at the end about any documents that you have and so on. First thing, just to kind of get us started, I always like to know how people got into the profession in the beginning. What 'was your path into social work?

BOARDMAN. Well, role models. My maternal grandfather was a Methodist minister in

a small town. Religious--particularly in Western Washington. He must have made an impact on people because on his eightieth birthday he got over five hundred birthday cards from people he helped. My mother said that after she graduated from college, when she left college in the 1890s if she hadn't gotten married, she would have gone into some kind of counseling, which she continued to do throughout her life with people coming in bringing their problems to her. When I was trying to decide what to do, it was a path to follow.

McBROOM. So you were really decided all of your life that you were going to be a social worker and pursue that in a straight path?

BOARDMAN. Well, not exactly. I had problems when I was in college deciding what to do. My father wanted me to major in music. Anyway, I chose social work. Arlien Johnson was my first teacher of social work at the University of Washington. She had a Master's degree. You may not believe this, but in her classes she took so long to communicate and would look out the window and you'd think she lost her way. When I saw her three or four years later, when she was defending, her dissertation in Chicago I could hardly believe it was the same person, this dynamic person from the time in college.

McBROOM. You had some undergraduate work in social work at Washington and went on for graduate work in social work at the University of Chicago. You worked in between.

BOARDMAN. Yes, when I graduated from college in 1928 the economy was pretty good then, but the jobs in social work were practically zero. Incidentally, in that connection, Arlien in 1927 had had the head of the Social Welfare League in Seattle,

eventually called the Family Service. She had Ruth Fitzsimmons who you know, come talk to us. She told us that no one should go into social work unless they had a supplemental income. The most we could expect to earn in social work was ninety dollars a month. That was when we reached the top. When I graduated in 1928 the only job that I could find was in a settlement house in Tacoma that paid board and room and forty dollars a month. Now, although I believed that people should go into social work who wanted to give service, I didn't do it. I taught school for a year. Then I went to the Rape Class in Seattle for two years and then went to the University of Chicago. McBROOM. You got your Master's degree from the School of Social Service Administration at the University of Chicago?

BOARDMAN. I went in '31 for six months and had to return home because my mother wasn't expected to live) but she got better. I went back in '34 and spent that year at the University of Chicago. Then my mother really became terminal and I went home and I never went back to begin my thesis. So, I didn't actually get the degree, but I had the course work.

McBROOM. You finished all of your requirements?

BOARDMAN. Yes.

McBROOM. Helen, can you give an account of the different jobs that you have had, the positions during your career?

BOARDMAN. From 1934 I until 1941, I worked in various capacities for the State Welfare Department in the State of Washington: various jobs, like co-administrator, medical social worker, and head of the Social Service Department at Pierce County Hospital in Tacoma. I moved around. Then when we got married and came down here,

Arlie had suggested I apply--and I'm sure she helped--at Children's Hospital. I started there.

McBROOM. Your interest had been in medical social work. I remember that in Chicago.

BOARDMAN. Right, with Ruth Emerson. Then I started work there (Children's Hospital in Los Angeles) on February 5, 1941. I retired July 1, 1972, some thirty-one and a half years later.

McBROOM. So you don't have very many different jobs to account for? You were no fly by night.

BOARDMAN. I was a fly-by-night from 1929 until 1931. I mean, two years of not being on a regular job.

McBROOM. Tell about how you saw the profession develop in those thirty-one years of your service at Children's Hospital.

BOARDMAN. Well, first during the Depression, many people came into social work in contrast to 1928. By 1933 about the only jobs that were available and paying money were in social work, so there was a great influx of people into social work.

McBROOM. The job market really turned upside down.

BOARDMAN. Oh, yes. Remuneration changed markedly too. It didn't compare with many other professions, but it was adequate.

McBROOM. To pay a living wage.

BOARDMAN. Right. Then what I began to see happen was more interest in the private practice, which could pay more money.

McBROOM. When did you begin to see that, Helen?

BOARDMAN. Right after World War II. I really did. It was when the private practice

began to flourish. Also, there was a lessening of interest in where social work had started. So there was this great expansion of social work into private practice, into industrial settings, a great many different areas where social workers moved--leaving a big hole, from my point of view, in the service from where we started.

McBROOM. Did it mean that it was difficult to recruit good social workers to staff then?

BOARDMAN. Yes, indeed. Very difficult. The majority of our services were to the poor. I am using poor in a generic kind of way. The people that we had to work with in the county hospitals, in the Children's Services, and all of these other areas, were the less qualified and had less background for service. It was very frustrating for those of us who were trying to coordinate services with Children's Services and the County Hospital and so forth. We were having such a terrible time. Now, in the course of this I have a confession to make: that is, that one of the people who would work for the county and who got on a grant to go back to USC to get a degree in social work, she got a degree but she could not bear to go back and work in that bureaucracy. She came to me and I was upset at her wanting to move. She said, "I am not going back there and I have the alternative of paying the money to the County for the amount that was given to me." I employed her. So in a way, I went along with this.

McBROOM. You were able to attract staff because they could really practice more as professionals than they could in the county bureaucracy?

BOARDMAN. Right, but I had trouble too getting staff. One of the worst was there were always developing positions for social workers. The schools weren't able to turn them out fast enough with a Master's degree. If you set up the Master's degree as the basic criterion, then the schools weren't providing them fast enough...

McBROOM. Did you usually have the Master's as an entrance requirement at Children's Hospital?

BOARDMAN. Well, after I came it was.

McBROOM. Did the department grow during those years? Could you tell us something about the hospital and the department?

BOARDMAN. When I went there, there were six social workers. I am going off in a different direction here. In the process of development of social workers with theses, private practices and various specialization were always developing. In the hospital the people went into the psychiatric department and they insisted on having their own department. In mental retardation, their own department. This was very disturbing to me. I believed that the criteria should not be what roof you are under but the basic kind of service you were giving. In essence, the differences were related to how you related to the administration of that particular unit. This also went into all fields of social work, not just Children's Hospital. I don't know how many social workers there were when I left because they kept splitting off. At one point I got into trouble with the Children's Bureau.

McBROOM. Tell about that.

BOARDMAN. Oh, no; it is too complicated.

McBROOM. It would be interesting maybe for these archives.

BOARDMAN. Well, the head of the Mental Retardation Service wanted control of social work He had put in a grant request, and--anyway, this is embarrassing because he lied to me. He got support within the administration for the lie that the Children's Bureau said they wouldn't provide the money for the grant unless it was under his direction.

Well, by that time, I was very concerned by what was happening in the whole field of social work with all these different units all trying to serve one family. You have a child with mental retardation and that person had a social worker; and you had another child with heart disease and that one had a social worker; and you had another one in the psychiatric unit, with another social worker. This was incredible and a complete reversal of all the things going back to the White House Conference (on Children) in 1928. So I sat down and wrote to the United States Children's Bureau protesting this decision that the departments had to be separate, that the social workers had to be separate. They (Children's Bureau) came out to interview. They said they never said such a thing to the Mental Retardation Service. In the mean time, there was a great to do because the grant was threatened by my newsletter. So I got called to a big meeting with the head of the Medical Service. There were about ten people there. Fortunately for me, one of the men who had been in the meeting where I had been told this, said, he and the administrator had both known it wasn't true. So I didn't get fired. It turned on why did they lie to me. So anyway, that was that. I had a principle and I was going to stand up for it, and I did. But it is embarrassing to think about it.

McBROOM. What has been the outcome of that by this time? Is it still fragmented?

BOARDMAN. Before I left the administration, I had other problems, competing problems with the people in the Psychiatric Service demanding more pay, more benefits, this kind of thing. You know, it was this competition. This has always bothered me because I thought we were there to serve people and not to fight each other. But administration had come to that point. By that time I had had enough problems with the head of the Psychiatric Service. I said I hoped they would combine

them and combine all the social workers into one unit, but not while I was there. I was terrified as hell. So they did.

McBROOM. You left a kind of a legacy for integrating departments.

BOARDMAN. But since then I don't know really what happened. One of my principles is that when you leave you cut the cord: you don't try to hang on. So I cut the cord. I have done that with other things, too. I think it is only right for people coming in to pick up and develop their own programs and their own ways and I have just seen too many people who haven't been able to give up and get very upset when there is a change and all of those changes are gone.

McBROOM. How about some of the changes you saw in the hospital at large and in the community during your service?

BOARDMAN. Well, in the hospital, of course, it has expanded tremendously. It was a small hospital when I went there in 1941. Now it has this tremendous research and all of these different activities. I think it is one of the outstanding children's hospitals in the country. Now, in the community: this leads me to something else because in the community, after World War II, one of the things that happened was that the Welfare Planning Council got together a group of Chamber of Commerce and various, other people to develop a plan to try to coordinate services in this county--which was expanding so rapidly after World War II. They got the money--at that time \$50,000 seemed like a lot--to do a survey of the hospital needs in this community and they brought in an outstanding group, the Hamilton Group. Were you here then?

McBROOM. What year?

BOARDMAN. This was in 1947, before I came. They spent a whole year evaluating,

looking ahead to the needs of this community for they could see this expanding population. They developed a forum for the central core and there were already all these hospitals in the center, with Cedars, Hollywood Presbyterian, Good Samaritan, California Hospital. All of them were well-established hospitals within a small area. Their idea was that in order to prevent further competition in developing programs, you have to have all this expensive equipment. They would have developed satellite hospitals around the county--in Lancaster, in the San Fernando Valley, which would take care of the day-to-day problems and would send the major specialized problems into the hospitals that, had been already developed and operating. Thus, they wouldn't have everybody competing for the patients, for the money, for all this equipment, and for all of these buildings. The County Board of Supervisors participated in that study too, because it involved USC Medical Center and USC County Medical Center, and so forth. Well it was \$50,000 down the drain. Nobody paid any attention to it.

McBROOM. You mean every little hospital was a rival for every kind of service from then on? The last twenty to forty years.....

BOARDMAN. Some of the hospitals, of course, have had to face the reality that many of them have had to close their obstetrical units because there weren't that many patients. Gosh, the expense of this equipment; every hospital has to have the newest and most expensive in order to get the patients. This is just an overview of what is going on.

McBROOM. This is one of the things, probably, that has made medical care so expensive.

BOARDMAN. It is. Well, there was an effort about twenty years ago to set up these

democratically elected groups, you know, that were going to screen the needs for the hospitals; but that didn't work either. That was sponsored from Washington. Anyway, what I see is this tremendous increase in cost, without the hospitals ever agreeing to divide up the patients. You've got people practically side by side.

McBROOM. There is competition and rivalry in every building.

BOARDMAN. Well, it's that, but it is also that in order to survive they have to have the patients. It's a survival kind of thing, too. Everybody has to say—look, we've got this marvelous equipment. This is maybe far fetched, but that's the way I see what's been going on.

McBROOM. Coming back to your own career, Helen. What thing stands out to you as having been your most gratifying achievement?

BOARDMAN. Well, the thing that got me the most attention, of course, was what I did, with the doctors at the hospital in identifying physically injured children and trying to get some coordinated effort in the community to see what could be done to protect them. The article I wrote was rejected first by the *Social Work Journal*; then I sent it on to the *Medical Social Work* section because, at that point, the journal was divided and each division had its own opportunities; they wanted to publish it. The problem was that the article was about coordinating all the resources, including the police, the district attorney, the juvenile courts, etc.; trying to work through the juvenile court to find a way of protecting children from further injuries and death. The editors of *Social Work* were very upset and they published the article then under the *Medical Social Work*.

McBROOM. What was the basis of their upset?

BOARDMAN. This was a matter for social work. The police and legal authorities had

no place in it. No, I'm not kidding; that was it. They wrote that in an editorial that accompanied the issue in which the article appeared.

McBROOM. Was there a reaction from readers, and letters?

BOARDMAN. Oh, yes. I certainly did get reactions from readers. I went back to...

McBROOM. About when was that, Helen?

BOARDMAN. That was January of 1962 that the article came out. The week that the article came out, one of the doctors and I went back to a meeting at the US Children's Bureau. The Children's Bureau picked up on that. They started on a crusade to get a mandatory reporting law throughout the US. At that point I think I spent most of my time being interviewed on radio and TV.

McBROOM. Most of your working hours, you mean.

BOARDMAN. Well, it wasn't all through working hours.

McBROOM. It intruded on your private life as well.

BOARDMAN. Oh, did it ever. Greg insisted that he wasn't married to me; he was married to Children's Hospital. One of the startling things was I got quoted on the front page of the *Wall Street Journal*, no less. I mean, this is just an example of getting around. There have been a lot of changes since then.

McBROOM. What are some of the changes that you think are important?

BOARDMAN. One of the things that trouble me a great deal is that from my point of view the identification of the physical injuries was a mental problem. That was the point at which I started. When they began to include everybody under the sun in the reporting law--the teacher, and everybody who thought there might be an inflicted injury that was to be reported, I could never quite accept that it needed to be that widespread.

In the end it was going to have to be a medical identification anyway. The other part of that was that we worked very hard for years to get the Protective Services involved.

This was to come in at the first indication of any problem, then to get it to a social worker at that point, to try to prevent damage before it reached a laser point.

McBROOM. You tried to preserve the family.

BOARDMAN. And to try to preserve the family. Finally, I think it was after Reagan was Governor, a Republican assemblyman took hold of this and we got the Protective Services law. The day it landed on Reagan's desk, we were all chewing our fingernails about whether he would sign it. It was touch and go, but we got an advance (notice that he would be supporting it, so one of the members of the committee whom I called got busy and Reagan did sign it. But there were so many handicaps added to the Protective Services Bill--the implementation, not the bill, but the implementation, to try to keep it from being effective, such as the ninety-day limit on service.

McBROOM. Were these administrative rules coming out of the State Department?

BOARDMAN. Yes. A ninety-day limit when you are trying to move in. It takes almost that long to get the trust of the family to do anything. So there was really a concerted effort, even though Reagan had signed the bill reluctantly, to get it implemented in any kind of effective way. But that was so that when a case would come to our attention that we couldn't document that it was really a medical abuse, we would try to refer it to protective service; it was just like nothing at all.

McBROOM. They were interested in only medical abuse and physical injury.

BOARDMAN. Well, from the point of view of the hospital, that's where we were getting it.

McBROOM. I mean, that when you referred these cases out, they were not accepted.

BOARDMAN. They were not accepted. Or maybe they were accepted but they were handled and closed almost immediately. This is one of the things that has been troubling to me. It still troubles me because I don't know. You may know better than I know because I haven't kept up at all whether Protective Services has functioned at all. At one time it was the only service that remained at all in several mandates. In fact, Protective Services were all that remained in the way of Child Welfare services. That's one of the things that trouble me. Another thing that has troubled me is that originally, the children were not (to be) returned to the family unless it could be demonstrated with some kind of assurance that the child would be safe from further injuries. Was it four years ago they completely overturned that? The child has to be returned unless it can be documented that the child would not be safe. Well, that is pretty hard to do. That is another change that...

McBROOM. Has there been any kind of plan for family treatment to accompany this? Or any support for family treatment?

BOARDMAN. That I think is the question, that is why right now you read in the newspapers that the Children's Services workers are threatening to quit because they can't possibly serve the patients. How can you give treatment with the caseloads they have? You have, I think, kept up with that better than I have.

McBROOM. You are really mandated to serve these children at risk, but you can't do it.

BOARDMAN. That's right. They have never been able to do it. From the beginning we said that the caseloads should be under thirty per worker. They have never been under sixty. I think the last I knew they were over one hundred per worker. How on earth can

anybody do anything effective with that kind of a caseload? Well, as I say, that change troubles me. I'm sure there are changes that are valuable. It bothered me when they insisted upon a review of the case every three months. If the changes hadn't occurred then, the child would be referred for adoption within a limited period of time. That puts a tremendous pressure on a social worker: within twelve months to have made such dramatic changes that the child has to be placed for adoption. All of this boils down to that it costs money.

McBROOM. And the money is not easy.

BOARDMAN. You have this feeling of not wanting to give up anything ourselves to help others.

McBROOM. The staff at Children's Hospital--were they able to carry some of these on a sustaining basis with children at risk and carry on the program of family treatment?

BOARDMAN. No, we would refer them to the Child Welfare Service, a public agency under the law. I think that one or two of the psychologists had bypassed the law and taken on some of the cases...

McBROOM. These were psychologists at Children's Hospital and carried them over a period of time?

BOARDMAN. They were ignoring the mandatory reporting laws.

McBROOM. What do you think that you learned from all this that you might advise social workers or social work administrators coming along?

BOARDMAN. I don't know at all.

McBROOM. The whole history of child abuse: I think you are known as being one of the first to recognize and advocate for abused children.

BOARDMAN. One of the things I was accused of, because I was concerned about the children, was of ignoring the family, however...

McBROOM. Who accused you?

BOARDMAN. The psychiatrist at Children's Hospital was the one who said this was all punitive to the parents, although it seemed to me it was punitive to the parents if you let them go on repeating these injuries until something more drastic happens. We had too many of them end up dead from repeated injuries. But I deny that I was punitive to the parents or that this was primarily unrelated to parents. As you know, before I retired I went on the board of Parents Anonymous. The whole focus of that organization, of which I was president for two years, was to try to help these parents to reach the point that they could resume their responsibilities and really with a lot of success.

McBROOM. We were just getting started on Parents Anonymous. Start at the beginning of it and tell me about your involvement.

BOARDMAN. But, before I leave that, I did want to say one more thing on working with abused children. One of the things I've found, learned, was that all the people involved, whether it was the police, the district attorney, the judges--they were all equally concerned and really came together. That was what the project was all about: bringing them together to look at how you solve the problem. That was an important lesson for me.

McBROOM. To what extent do you think this actually happened, Helen?

BOARDMAN. Oh, I know it happened. Everybody came together despite the social work professionals that had taken an opposite stand, that it was a social work preserve more or less. But the police, the district attorney--they all were feeling frustrated and

then the judge of the juvenile court came in with this solution that you didn't have to prove who did it in order to protect the child. Everybody's side was relieved. Actually, I think I developed more friends in the legal profession than in the social work profession out of that. I think some of that is reflected now in this group that has been meeting here for many years on child abuse, the Interagency Council on Child Abuse.

McBROOM. Let's talk about that a little bit and then move on then to Parent Anonymous.

BOARDMAN. I don't really know much about that. I just know it existed.

McBROOM. Are there some of the people that, judges and so on, you remember as being very outstanding and successful advocates for children?

BOARDMAN. The one that I knew best, of course, was Judge O'Dell who was head of the Juvenile Court when I met him. He kidded me even when he came to my retirement party, saying I was the most stubborn woman he'd ever met. I wouldn't give up until he came up with some kind of solution.

McBROOM. He was really praising you for being stubborn.

BOARDMAN. Oh yes. Anyway, I think this Interagency Council, Jean Matasinker, who is now a Superior Court Judge who was with the district attorney for a number of years, I think was one of the people who picked up on this concept of the agencies getting together to resolve the problems the court made.

McBROOM. How does the council operate?

BOARDMAN. I don't really know. I have never been in on it.

McBROOM. It was more of an outgrowth of your work.

BOARDMAN. I don't know that it is but it is coming in to be. Now Parents Anonymous,

the organization got started with Charlie Kay, who had been to innumerable agencies because of the treatment of her daughter. She finally got to a social worker, Leonard Lever, who said to her "why don't you set up a group." They came to me at that point and asked if I could refer--they called it Mothers Anonymous--if I could refer anybody. I said I can't refer anybody to you. They won't even admit the child has injuries let alone get me involved. I was very wrong but that was my impression. They started with two or three mothers who got together.

McBROOM. Did they start at Children's Hospital?

BOARDMAN. No, this was completely apart. They had been going for a short time and decided that they needed a board. They had two psychiatrists, then they had invited Jean Matasinker, the district attorney, and me and one or two others to join the board. It was a combined board of the mothers and the professional people. By the time I joined, they had started a chapter at the women's prison with the mothers there who had been convicted. It just took off. I don't know how it happened.

McBROOM. Why did you suppose that they wouldn't come forward?

BOARDMAN. When you sit down and talk with them--their reactions. The doctor would explain the injuries; to them then I would say to them, "Now, under the law, we are required to report these to law enforcement." They would say, "Yes I understand." Very often they would say thank you. But then they would deny that there were any problems involved. They would say well, or you know, and have all kinds of weird explanations. Sometimes they would deny that there were any injuries. I just didn't see how anybody was going to respond to it. Now, wouldn't you like to go talk to somebody who also has these problems when they said there weren't any problems? It really was

amazing the way Parents Anonymous caught fire. The next thing we knew, one of the mothers had gone to Texas. Then there was an organization in Texas. Then one turned up in Canada and Australia, all around. Chapters were coming up all over. It was a tremendous kind of explosion and it got a lot of publicity. I don't know what else. I was really astonished, but pleased to be a part of it.

McBROOM. Tell about your term as the president, as the national president.

BOARDMAN. Up until the time I became national president, which I think was in 1978, our board had been the local board.

McBROOM. You served continuously on the local board?

BOARDMAN. Right. By that time we had gotten--I think it was in 1975 or thereabout--the first grant from the government, a federal grant.

McBROOM. Was that Children's Bureau?

BOARDMAN. It was under Health and Welfare. It wasn't under the Children's Bureau section. We had these monthly meetings because we were always in problems. Originally when I first started going to these meetings, I thought about how we could get money for stamps to write to Australia and to write to Canada. We didn't have a secretary, poor Jolly was trying to answer letters out of her house, and it was terrible. Struggling all the time with pennies. She would take up collections at the meetings from the parents. Then the federal government came through with a grant. We added some board members from other places in the country. We continued locally to meet once a month. In the meantime, we kept trying to figure out how we could be a national board. If you are meeting every month and your board members are scattered all around the country, you are not a national board. When I took office as president, I said we are

going to now be a national board and we are going to try to meet twice a year instead of once a month. In the meantime, we had the money to develop a staff and other secretarial help and so forth. So that was the first thing I did: get a national board meeting twice a year with these people coming together from around the country, sitting down to look at national problems. By that time we had some chapters in Germany and England and various places. We still stuck to being a national board in order to get federal money. One of the things I insisted on was the limitation on the period of time that people served. That limited the board presidency to two years.

McBROOM. Did you have a constitution and bylaws?

BOARDMAN. Oh, yes, we had those from the beginning, from the time we incorporated. We amended them. By 1980 I was saying I'm getting too old, but I can finish off my term. Well, I didn't quite. I resigned a year ahead of time because, again, I think people should not cling. I might also add that some of the members of the board were unhappy when I said we were only going to meet twice a year. It was the camaraderie, but that was that. I tell you Parents Anonymous is still going on. It has its problems.

McBROOM. What are the problems?

BOARDMAN. Oh dear. I don't know how to word this tactfully. This is another thing that upsets me. That is when people compete for a position or stay there and forget what their organization is focused on. Some of that happened with Parents Anonymous. After I left, as I said, I cut myself off except that they planned an award for me, but I think with the hope it would make money every year; it was a fundraiser. The other thing that happened was that the National Committee for Child Abuse, which is in

Chicago, and Parents Anonymous were considering uniting because in each state they had their chapters. Each organization was competing for funds. The head of Parents Anonymous thought that the board had voted to join with the National Committee. Apparently it hadn't reached the total agreement that he thought it had and it got publicized too soon and caused a lot of disruption. There are still two sets of organizations and PA. Federal money, of course, had limits on time and PA is now having to find its own money elsewhere; the National Committee is struggling to find its money so they didn't combine. I wrote an appeal that, for goodness sakes, let's think about what it is we are here to do and not scrabble over who is going to do what. That is a real problem with social work too, the scrabbling for money.

McBROOM. The rivalry of social worker against social worker.

BOARDMAN. At Children's Hospital it's this kind of thing that upsets me. You can see it in bigger organizations, too. This is comparable to what I was talking about. At children's Hospital a nurses group would become interested in what can we do and be of more service to patients--or a physical therapist or occupational therapist. Then the social worker would come to me, very upset. You know they are getting into my territory. This I absolutely could not tolerate, because wherever the patient can get help we want him to get help from whoever can give it best. I am convinced that social work has a background and a professional commitment and a confessional base that we can give certain kinds of service better than other people. To compete over who is going to talk to this person about this little problem, to me is ridiculous and unfortunate and does not help social work. Am I making myself clear?

McBROOM. Yes. I understand completely.

BOARDMAN. That was the same kind of thing that I was relating to these two organizations.

McBROOM. What about the young mothers with daughters?

BOARDMAN. I would like to turn that off.

McBROOM. Tell me about the Helen Boardman Award.

BOARDMAN. The PA needed to raise some money and they went together with the committee to give an award. They gave it; they put my name on it; and it has been given out three years.

McBROOM. Who are some of the people who received the awards?

BOARDMAN. Two doctors and the police officer who was in charge of the abuse program for the City Police Department and judge and a psychiatrist who were very active in the sexual abuse field

McBROOM. Do you have a medallion or a plaque?

BOARDMAN. I have a plaque. I tried to keep them from doing that.

McBROOM. Over your objections they created the Helen Boardman Award. It's a great honor.

BOARDMAN. Right. Anything else here?

McBROOM. Maybe we could think about the changes you have seen in practice.

BOARDMAN. Yes, I wanted to talk about social work.

McBROOM. Between the time you entered the field and now.

BOARDMAN. I told you in the beginning about it. The social work profession.

McBROOM. When did you come to LA?

BOARDMAN. I moved to Chicago in 1932.

McBROOM. No, when did you come to LA?

BOARDMAN. I came to LA in 1949. In the State of Washington we had our Social Workers Association but it wasn't spread out into little divisions because there weren't that many of us. When I came down here, there was a Social Workers Association and then there was the Medical Social Workers Association and there was a Psychiatric Social Workers Association and there was a School Social Workers Association and then shortly after the same people in private practice, and you couldn't, afford to belong to more than one, with the result that the Social Workers Association was meeting and the Medical Social Workers was meeting. Also, there was this competition in terms of salaries and benefits and attracting people. I don't know whether it was before you came or afterwards, the head of the Psychiatric Social Workers was a close friend of Heath's and said, let's get together on the Welfare Crime Bill. We started meeting together and finally we decided as a group that this was all ridiculous and we decided to set up our own organization. I don't think you were here yet. Were you? We set up an organization called the Social Workers Association of Los Angeles. We were meeting-- a whole group of us--. We ran into this competition with a small group of dissidents who insisted on being separate. We called ourselves the Social Workers Association of Los Angeles-SWALA. Chauncey Alexander was one of the people involved, so we had our meetings and we began to communicate with other people around the country. I think we had a big part in the development of NASW, getting it started, because we were the first group here in Los Angeles to give up all this old separateness. We had our problems with the dissidents.

There is another problem with dissidents that I remember, that still has a bearing on

what's going on today, although I haven't kept up with this. When I came to LA we had an official recognition of registered social workers. They took an examination to be registered as a social worker. It's a state law. You weren't licensed, you were just registered. It identified you as having to be more definitive. So we set out with committees, a committee from the north in San Francisco, and a committee from LA, to try to work on a licensing deal. In the meantime there were chapters, social work chapters in San Diego and Long Beach and other places up north: smaller chapters. Los Angeles and San Francisco had the two big chapters. We started meeting twice a year at least. They would either come here or we'd go up there to try to work on something we could agree on. Our problems at that point were many. One was we had this great influx of social workers who had been doing the job since the depression years but didn't have the educational background and requirement. But they were doing the job. Then we had the other group that said if you are going to have licensing, it has to be loosely attached to the educational qualifications. Did we struggle? We struggled and we'd think we'd resolved and found the compromises and sometimes it would be two levels.

Then we would come back to our various roots and we would communicate with the other social workers around the state. We would have to meet again because there were other problems arising. Finally we thought we had something that had been voted on by the social workers around the state, which was essential if we were going to the legislature. We had legislators already to introduce a bill. It was prepared and all set to go, when the dissidents rose up in wrath and sent telegrams to the legislature that they would oppose this. We struggled so hard for so long. We gave up because the

legislature wouldn't give in if the social workers were going to fight among themselves.

McBROOM. What was the position of the dissidents?

BOARDMAN. That it had to be a Master's degree.

McBROOM. Your bill would have recognized every level?

BOARDMAN. It would have tried to give some recognition to the working core. So it's still a struggle I guess. It hasn't been resolved yet.

McBROOM. What do you think of the licensing as it is at the present?

BOARDMAN. I really don't know much about it. I think it is a very good idea and I am all for it.

McBROOM. The recognition of the working core has never been achieved the way that your bill would have done.

BOARDMAN. I think some of that working core has left.

McBROOM. It has really been superseded by a new generation.

BOARDMAN. Right. I think it was really critical. Do you think I am right about that?

McBROOM. I haven't given it that much thought or haven't looked closely at the issue but I think that getting a graduate education and getting a degree has become more possible for more people.

BOARDMAN. Oh yes, there are more schools. In 1946 and 1947 I think those were the time when we were struggling with this. There were only the two schools.

McBROOM. You said they really weren't turning out that many people.

BOARDMAN. No, and the jobs had to be filled and so there was a real problem. I think in forty years it has changed markedly. It's more than that. It's on organization and structure of the community.

When I came here in 1941, we had what was called the Welfare Federation, which had two functions to raise the money for the agencies. Then part of the money that they raised also supported the Welfare Planning Council. Do you remember that? It had a very important function in bringing together the agencies and trying to plan ahead for future needs for the agencies and coordinating. I thought it was a tremendous agency McBROOM. It worked better than anything that supported it.

BOARDMAN. I don't know what supported it really. What happened at that point, as I understood it, it was at the time when there was always conservatism and looking under the bed for Communists, and everyone was a suspect. The powers that be in the Welfare Federation looked with suspicion on what the Welfare Planning Council was doing which was dominated by social workers. They finally said we aren't going to give you any more money. You will have to raise the money for your functions by yourself. They pulled the rug out. It became the United Way. Basically, the function money raising, I don't think they engage in a great deal of community organization, do they? I thought it was a great loss.

McBROOM. You've seen the working process of community organization kind of deteriorate over the years.

BOARDMAN. I guess I have.

McBROOM. You have seen accomplishments too.

BOARDMAN. Yes. I think social work has come a long way.

McBROOM. What do you think social work has accomplished as a profession?

BOARDMAN. I think we have attained more security in our profession. I think we know who we are better I think we know what we want to do better, what our goals are. I

think since we have more security in who we are and what our goals are, that we have gained more security in the community.

McBROOM. Finally, I would like to ask you if you have any archives or documents that you would like to submit.

BOARDMAN. The truth of the matter is that when I left, all those books and pamphlets and things went down to USC.

McBROOM. They are already there.

BOARDMAN. The thing that happened was over a three-year period, working some Saturdays and some Sundays. I cleaned out thirty-one years of accumulation. Much of was minutes of meetings. Some of these meetings that I have mentioned here. I looked at them and thought nobody would ever look at them and they went out into the incinerator. Tons of stuff, but all of the books and pamphlets that I had went down to USC.

McBROOM. You mentioned the Parents Anonymous book for which you were interviewed. Do you still have that?

BOARDMAN. I don't know. This is *Hope for the Children*. It is about Parents Anonymous.

McBROOM. Winston Press published this in 1979.

BOARDMAN. This is something that I couldn't believe. I got a call in 1972 or 1974 saying may we have permission to publish your article to be used for employers. I said, "Oh sure, go ahead." Here it came in a hard back.

McBROOM. This is your paper, "Project To Rescue Children From Inflicted Injuries." It was reprinted from *Social Work* 1962. This book is effective utilization of psychiatric

evidence from the Practising Law Institute in 1970.

BOARDMAN. I couldn't believe my eyes. Eighteen years later to have been discovered. No not eighteen, eight years later. Eight years later I get into a hard back, that I never expected

McBROOM. I think that is a very appropriate and honorable ending. You are in a hard back. I want to thank you very much.