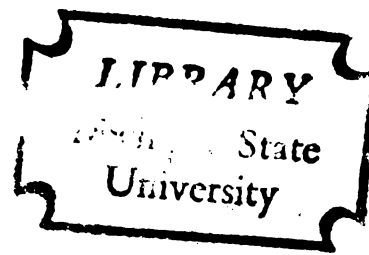


A STUDY OF POVERTY FROM TWO PERSPECTIVES:
STRUCTURAL FUNCTIONALISM AND EXISTENTIAL
SOCIOLOGY

Thesis for the Degree of M. A.
MICHIGAN STATE UNIVERSITY
DEIRN JOHN GEARD
1974



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FUNCTIONALISM AND EXISTENTIAL SOCIOLOGY

A Thesis
Presented to
the Faculty of the Graduate School
Michigan State University

In Partial Fulfilment
of the Requirements for the Degree
Master of Arts

by
Deirn John Geard
January 1974

650037

ACKNOWLEDGEMENTS

This thesis is based on research supported by a grant from the Presbytery of Detroit, United Presbyterian Church in the U.S.A. I am most grateful for this support.

I am indebted to the Departments of Sociology and Psychiatry, Michigan State University, in granting me permission to undertake my somewhat unusual graduate program. Without attaching liability for the content of this thesis, I extend my gratitude to Professor Peter K. Manning for his willingness to act as supervisor, his academic integrity, the expansion of my sociological horizons, and most of all for that rare educational experience, self-discovery. My thinking on questions of human perception and experience, as on all matters medical, owes much to my friend and teacher, Professor Ronald Simons. I am indebted to Professor Barrie Thorne for her careful criticism of the final draft and her helpful suggestions.

I wish to thank Mrs. Royleen McKelvey for the patience and care with which she assembled and recorded the research data, and Mrs. Colleen Thompson for her effort in decoding many corrections and changes, and typing this thesis.

ABSTRACT

An outline of the problem of poverty as it occurs within the United States, and the basis on which it has generally been defined and studied, is provided. An analysis of some of the key criticisms of the conventional or functionalist perspective are noted, and "avoided issues", constraints, and limitations suggest new research directions. An overview of the development of existential sociology and a proposal for its employment as an additional perspective for the study of poverty is attempted. Field research conducted along conventional lines is undertaken in order to indicate the shortcomings of conventional sociology; especially its inability to handle significant subjective - type data. It is concluded that although the functionalist approach to poverty makes an important contribution it may also have certain disutilities in the analysis of the problem; especially from the viewpoint of those living in a state of poverty.

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CHAPTER I

THE PROBLEM OF POVERTY IN THE UNITED STATES

Outline

This thesis is designed in four parts. In the first part I will outline the problem of poverty as it exists in the United States, the basis on which it has generally been defined and studied, together with some criticisms of conclusions drawn by conventional sociology. In the second part I will discuss some of the criticisms which have been directed at conventional sociology, that is structural functionalism, and attempt to provide an overview of the genesis and development of an alternative perspective known under the umbrella-like term of existential-phenomenological sociology. The third part will describe a conventional piece of research undertaken to study the problems of the elderly in Southwest Detroit, Michigan. The data, together with some significant anomalies in them, will be presented and discussed with a view to giving support for the argument which constitutes the fourth and final part of the thesis. In the final

part I will argue for the inclusion of subjective type data in "the doing of sociology" as a necessity if the discipline is going to improve its past poor performance in assisting society to deal effectively with the more serious social problems which currently beset it.

As it is explained later in the thesis, due to serendipity, the return of my supervising professor from sabbatical armed with thoughts previously considered as being antinomian in the sacred halls of empirical sociology, conscience, academic integrity, submission to inevitable dependency in the "two game situation" of academia, call it what you will, the thesis changed course in mid-stream. I am glad that it did.

The Problem and Its Characteristics

Poverty in the United States, by whatever method and criteria it is defined is a major social problem (Kolko, 1962; May, 1964; Hunter, 1965; Will and Vatter, 1965; Galbraith, 1958; Suttles, 1968; Riesman, 1973 and others). One of the more modest estimates indicates that one out of every ten Americans live in the state of poverty. Yet, the nation is considered to be the most wealthy in the world. It has a gross national product exceeding \$861 billion. The average family receives an income exceeding \$10,000 a

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year, and some 76 million individuals earn an average wage of \$2.85 an hour. The United States is the most affluent, technologically advanced, educated, and powerful nation in the world. In spite of these overwhelming benefits, and proclaiming the ethic of egalitarianism, it experiences poverty as a mass phenomenon.

Poverty in the United States is largely a problem of the aged, an arbitrary social status or category which is a direct function of the market place.

The locating of an individual in the category of "the retired worker", or the elderly, is a built-in protective device of the labor market in an open-market type economic system. The device operates to protect those who have controlling interests in the economy. It does this by excluding older individuals from participating in the commodity and service production system of an economy oriented toward the development of a maximum profit. It guarantees a ready flow of younger, and less expensive to hire and maintain, workers into the production end of the economy. Younger workers are also more likely to be equipped with the skills and knowledge demanded in a society which experiences rapid change in technology. An educational system, largely organized on the philosophy of pragmatism, assists in maintaining this

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flow. Also, younger workers are less resistant, it appears, to changes in production and marketing methods, and the decrease in quality which seems to accompany mass production. Modern industry also requires that its employees be willing to make frequent, and socially disruptive, moves between widely separated national, and international, locations. Younger workers, competitively oriented, seem more willing to undergo such personal inconveniences, apparently placing material gain above inter-personal gain. As Whyte (1957 : 435) has correctly claimed, "Adaptation has become more than a necessity; in a life in which everything changes, it has become almost a constant". In a modern, highly industrialized, competitive, materialistic society such as the United States, the norm prescriptions require an individual to relinquish occupational and control functions at, or about, the age of 65 years, irrespective of whether the individual is physically, mentally, or occupationally competent or not. This demand, although there are exceptions among those of higher income and professional brackets, operates for most individuals, especially among low-income earners.

One significant consequence of the above requirement is the arbitrary and automatic re-location of the individual in the economic opportunity structure. The

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income level at which re-location is made is almost always at a much lower point than that occupied during the working period of life. Also, it is usually irrevocably fixed for the remainder of an individual's life, unless, of course, there is a further lowering of income because of inflation or similar cause. Obviously this process of re-location acts to reduce the overall life chances and life quality of those placed in retirement. Many are reduced to a state of dependency on those who remain in the production system and are consequently viewed as dysfunctional with respect to the norms of the profit oriented social system. The physical, psychological, and emotional well-being of many retirees is henceforth controlled by their now limited purchasing power which is in turn strictly controlled by accumulated savings, if any, pensions, social security, and public assistance. Retirement demands that many difficult adjustments be made. Reduction of income, the loss of social relationships which accompany retirement, reduced mobility, independence, choices and options, result not only in material losses such as money and the goods and services it can buy, but invisible losses. These latter losses take the form of alienation, loss of dignity and sense of personal worth, especially in a society which places such a high value on the work ethic, all of which

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are subjective problems, real, but not readily identifiable. Conventional sociology, with its positivistic orientation, has rarely recognized such factors as being of analytic significance and often excluded them from consideration of the problems usually associated with the aged and the poor.

Without the opportunity to supplement a reduced fixed income the everyday life of the retired worker becomes an unpredictable, ambiguous, anxious experience. It is a continuous tension between the exiguous material worth of the individual and the unforeseeable, yet inevitable, exigencies of human existence. In short, the poverty experienced by many of the elderly is, to a large degree, an arbitrary imposition of an impersonal, materialistic economic system which places material worth above that of human life; a cruel paradox in the face of a society which embosses its coinage with the statement, "In God We Trust". The aged represent the inevitable, normative, human waste of a profit oriented industrial society: an economic burden, and therefore dysfunctional social pathology. Conventional sociology, wedded to the Protestant work ethic, and which accepts the structure and function of a capitalist economy as normative, must of necessity prove inadequate to the task of solving the

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DEMOGRAPHY

Population

Life expectancy

Median age

Births per 1,000

Deaths per 1,000

Immigrants

Growth rate

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Population
the American
Office, 1960

problems which are spawned and perpetuated by the very system which commands its loyalty. The problem of poverty is not only likely to go unresolved by conventional sociology, but according to demographic data, will intensify in the years ahead if the present economic system is permitted to persist. As Colfax and Roach (1971:3) suggest:

MAINSTREAM, contemporary sociology is largely the creation of cold-war liberals who, for the most part, have been content to observe and rationalize the operations of the American colossus from a position of privilege in the name of science.

Demography and Poverty

During the past 70 years the United States has experienced what appears to have been a demographic revolution. This is especially so regarding the elderly.

TABLE 1

DEMOGRAPHIC PERSPECTIVE OF 20th CENTURY UNITED STATES^a

	Around 1900	Around 1970
Population	76 million	205 million
Life expectancy	47 years	70 years
Median age	23 years	28 years
Births per 1000 population	32	18
Deaths per 1000 population	17	9
Immigrants per 1000 population	8	2
Growth rate	2.3 percent	1.1 percent

^aSource: The report of the Commission on Population Growth and the American Future, Population and the American Future: (Washington D.C., U.S. Printing Office, 1972) 17.

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As the above table illustrates, between the years 1900 and 1970 the total population of the United States increased by some 129 million persons.¹ The "technology of mortality control" has increased life expectancy by some 23 years: from 47 years in 1900 to an average of 70 years in 1970.

Of the present total population of approximately 205 million, it is estimated that some 10%, or 20 million persons, are aged 65 years and over. Between the years 1900 and 1950 the total population increased by some 100% but the number of persons aged 65 years and over increased by some 300%. With the present demographic revolution in process, the number of these older persons is expected to continue to rise. By the year 2020 the number will approximate 40 million. This increase represents a sizeable proportion of the total population, a proportion which will be making a considerable increase in the demand upon the available supply of essential goods and services, and the means of exchange by which they may be acquired: money.

¹All statistics have been drawn from the U.S. Bureau of Census unless stated otherwise.

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TABLE 2
LIFE EXPECTANCY IN 1966^a

		Average number of years of life remaining		
		Total	Male	Female
At birth		70.1	66.7	73.8
At age	65	14.6	12.8	16.2
	75	9.0	8.2	9.7
	85	4.7	4.5	4.8

^aSource: Basic Concepts of Aging, 1.

The median age of the 65 years and over group in the United States is 72 years.

According to the 1970 Census, nonwhites comprise 11% of the total population and only some 6% of all persons aged 65 years and over. Therefore, nonwhites are proportionately under-represented in the population of the aged.

Among the elderly there are approximately 4 women to every 3 men, with women having a greater life expectancy as illustrated in Table 2 above. A woman aged 65 years can expect to live approximately another 16 years while a man can expect to live a further 13 years. Not only is the life expectancy of the woman greater than that of the male, but the rate of increase also favors the

female. Since 1930 the life expectancy of a female has increased an additional 13 years, from 61 years to about 74 years, while that of the male has increased by some 9 years. Brotman (1968:4) estimates that by the year 1990 there will be 170 aged women for every 100 aged men. At the present time six out of every ten aged persons are women, and only two out of every ten of these women have husbands living; seven are widows.²

TABLE 3

DISTRIBUTION OF THE AGED POPULATION BY MARITAL
STATUS, 1967^a

Marital status	Total	Men	Women
Total	100	41	59
Single	6	2	4
Married	36	24	12
Widowed	56	14	42
Divorced	2	1	1

^aBrotman, 25

According to Brotman (ibid:5) the geographic distribution of the elderly is "roughly similar to that for the total population; about two-thirds are urban residents. Within the urban areas, however, there is a

²Brotman, 4.

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higher concentration of the aged in central cities than in the suburbs."

Economics

The Bureau of Labor and Statistics has estimated that one-half of the 5.2 million married couples over the age of 65 years have an annual income below \$3,000. At the same time, the Bureau has estimated that in order to assure a moderate standard of living, such a couple, when living in their own home would require an annual income of approximately \$4,000. This means that less than half of the married couples over the age of 65 years receive an inadequate income. Some 60% of all single persons over the age of 65 years receive an annual income of \$1,500 or less.

It would appear that many of the elderly live in the central city and either below, or close to, the poverty level established by the Federal Government. This level is, of course, quite an arbitrary one, and as Miller and Roby (1970:21) have pointed out.

If we recognise that the official estimate of the number of those living in poverty may be on the conservative side, the following statement is all the more significant.

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One out of every four Americans over the age³ of 65 years lives in poverty. And even more live so close to poverty that its chilling effects hang over them. To the trials of old age are added the harsh burdens of poverty made more cruel by the fact that it need not be.

Over the past thirty years the United States has spent billions of dollars on welfare programs, housing assistance, public health, food, job rehabilitation, and social security in an attempt to alleviate wide-spread poverty. However, such expenditure appears to have had little success in decreasing the high incidence and prevalence of the problem. The failure to bring about a significant change in the magnitude of the problem seems to be due, at least in part, to the policies which have flowed from two dominant perspectives from which poverty has been viewed. First, there is the historic view that "poverty is the problem of the poor"; that it is their own fault. This in turn stems from the Protestant Ethic (Weber, 1930) which regards poverty as evidence of divine disfavor and that those living in poverty are therefore worthless, shiftless, irresponsible and undeserving. Second, functionalists, especially Parsons (1940), Davis (1942) and Davis and Moore (1945), have provided much of the theory upon which welfare legislation has been based.

³A.A. Publication No. 260, Department of Health, Education, and Welfare, U.S. Government Printing Office, 1970.

They have argued that inequality is both functional and essential for the maintenance of social equilibrium. In order that differentiated occupational positions are adequately filled there must be a differential distribution of reward. That not all occupational positions are equally pleasant, important, or difficult. However, as Tumin (1953), Schwartz (1955), Buckley (1958), Wrong (1959), Lenski (1966) and others have argued, the assumptions underlying the functionalist position "are theoretically problematical and empirically uncertain." To oversimplify, functionalists assume that what is good for the existing social structure (apparently viewed as normative and acceptable) must be good for the members operating within, poverty included.

Since the mid-1960's, however, there has been increasing recognition of the fact that while inequality may be an essential concomitant element of a capitalist economy such as is found in American society, this provides no justification for the extremes of wealth and poverty which currently exist. Also, that policies built upon views such as those outlined above only serve to exacerbate what is already a problem of intolerable dimensions.

As pointed out earlier, in the United States we live in a society based upon the work ethic of Protestantism

which supports an open-market economy. An economy which is largely unregulated. A major side-effect of such an economic system is the phenomenon of moderate inequality and marginal equality, or as Miller and Roby (1970) have called it, "relative inequality". Max Weber (1965) pointed out that a capitalist system depends upon the competitive exploitation of resources, both material and human, and markets for the purpose of maximising a profit. This, in turn, means that the meeting of human needs is of secondary importance to that of securing a profit in a rational-legal, bureaucratically organized, social system. As a consequence, the quality of life the members of such a society can expect to enjoy will be directly proportional to their ability to compete in the labor market, and share in the differential distribution of economic and material surplus. Automatic discrimination is built into the open-market system and of necessity creates both a class system and poverty. The ethic of egalitarianism is a paradox.

Because of the nature of the social system outlined above, it is hardly surprising that most definitions of poverty and private attitudes toward it, together with ineffective measures taken in combatting it, should, in the main, indicate a bias toward maintaining the economic status quo.

One of the most confusing questions is where to establish the cut-off point which distinguishes the poor from the non-poor. Miller and Roby (ibid:21), in a penetrating study of poverty and inequality in the United States, conclude that "Poverty is usually thought of as income deficiency", but that the level at which income is considered deficient depends upon the interests and power of those who set the level at which income becomes deficient. It is also significant that those who set this level are usually members of income brackets well outside of the state of poverty, and have little or no contact with those individuals who live in poverty. Therefore, the interests and values of those who set the level at which income deficiency is said to occur will always be superordinate to those for whom they set such a level.

Within the income deficiency approach, grave disagreements exist about the best way of measuring inadequate incomes. One approach, and by far the most widely used, is to define poverty in terms of cost-of-living budget estimate. This is the "poverty line" emphasis which marks current policy. It purports to define poverty in terms of an absolute standard needed to maintain a minimum level of living and therefore does not seem to be about inequality, the relation of low income to the higher income groups. In fact the standard shifts slowly with rising expenditure levels of the general population (ibid:21-22).

Roby and Miller are of the opinion that in order to overcome poverty in the United States it must be viewed

as an issue of overall inequality rather than just an issue of subsistence or mere physical survival. They consider the poverty concept, as it is generally understood and used, to be highly ambiguous because it lumps together too many hidden factors. That this is so is evidenced in the attitudes and policies of the nation's decision and policy makers, higher income public, the forms of public assistance available, and many of the sociological studies undertaken by conventional sociologists.

The forms which poverty takes, and the criteria upon which a definition may be based, are different in the United States, from, and must not be confused with, those of more rural and underdeveloped societies such as India and most parts of Africa. Basically, poverty means relative deprivation. In a materialistic, consumer oriented nation such as the United States this means material wealth. As Valentine (1968:13) correctly points out, there are several highly significant variables to be taken into account when attempting to define and establish levels of poverty:

...the total amounts of consumable resources available in relation to the population, the distribution of control over resources within the social structure, the cultural standards of value and adequacy, the proportion of the society's membership whose level of disposable resources stands below such standards, and the degree of contrast in welfare between higher and lower socioeconomic strata.

However, such a comprehensive view of poverty is not the general view in the United States.

Some Prevailing Perceptions of the Poor

Frequently the poor are viewed as an undifferentiated mass who are, by and large, undeserving (Gladwin, 1967). Poverty is frequently equated with incompetence regarding careful management of financial affairs (Rowntree, 1941), and characterized by such perjoratives as immediate gratification and conspicuous consumption. Numerous others regard the poor as constituents of an undesirable subculture which is self-perpetuating from generation to generation and which Lewis (1959) has stigmatized with the term "culture of poverty". A large amorphous mass of social lepers distinguishable by their lack of middle class values, social failure, discontent, anguish, living a life of apathy. Generally, the poor are regarded by those of the higher income brackets as an embarrassment, as a self-defeating, highly disorganized social pathology.

Matza (in Merton and Nisbet, 1961:619-669) provides a more insightful and accurate view of the poor than that offered by conventional sociology. This is especially so with regard to the aged poor whom he defines as being victims of stigma and degradation through no fault of their own, and relegated to the derogatory category of

the "disreputable poor". This category is intended to represent "that limited section of the poor whose moral and social condition is relatively impervious to economic growth and progress", and that "to ignore the stigma that adheres to this special kind of poverty is to miss one of its key aspects". In this category, because of the shared characteristic of being non-productive, the aged poor share the public sentiment which attaches to those who either will not work or have no marketable skills and are therefore parasitic elements within society. These elements include what Matza calls the "dregs" or "those spawned in poverty" and who continue to live on public assistance from generation to generation; the "newcomers" or members of racial and ethnic groups, together with those from rural areas, who lack the required job skills; and the "skidders", or those who through alcohol, drugs or some form of perversion have fallen from a higher status. The aged poor, because of their economic dependency, or the necessity of living in a cheap rent neighborhood, are lumped together with the disreputable poor, the Lumpenproletariat, or what Veblen called the "spurious leisure class". The aged, although they may have earned their way throughout their working life, through no fault of their own, experience a rapid downward shift in status upon exclusion from the economic opportunity structure.

Victims of the open-market economic system, they are locked into the inevitable process of degradation by a social system which, as Matza views it, "fosters pauperization".

As can readily be seen from the above brief overview of poverty, there is no consensus as to how the poor should be defined, studied, or treated. As with deviancy, for conventional sociologists the poor represent the faceless occupants of a negative status ascribed by the more privileged members of society. Conventional sociology counts the poor, describes the physical characteristics by which we are intended to recognize them, but fails miserably to explain how the phenomenon occurs, or how its members negotiate their everyday life and what it means for them. The psycho-social effects of being relegated to the state of poverty are not considered as part of the problem of poverty. In view of this serious omission of what I believe to be essential data, subjective in nature though it is, such a limited perspective is in no way able to provide constructive insights which may lead to amelioration of the problem of poverty within the United States. Existential sociology with its ability to incorporate and make use of both objective and subjective data seems to offer the additional perspective demanded for any study of the individual in society and the problems with which he is faced.

CHAPTER 2

THE NEED FOR AN ADDITIONAL PERSPECTIVE

Conflict Within the Ranks

Since the early thirties when structural-functionalism began to emerge as the dominant school of sociological thought in the United States (Parsons, 1951; Merton, 1966) it maintained a hegemony until around the beginning of the last decade. Since that time its influence has been eroded; first by the interactionist or "Chicago" school (Cooley, Thomas, Znaniecki, Mead and others), and now by the increasing thrust of the existential perspective (Garfinkel, Goffman, Cicourel, Manning and others).

Something of the nature of the earlier challenge to functionalism is outlined in a criticism made by Homans (1964: 809):

A theory of a phenomenon is an explanation of it, showing how it follows as a conclusion from general propositions in a deductive system. With all its empirical achievements, the functional school never produced a theory that was also an explanation, since from its general propositions about the conditions of social equilibrium no definite conclusions could be drawn. When a serious effort is made, even by functionalists, to construct an explanatory theory, its general propositions turn out to be psychological -- propositions about the behaviour of men, not the equilibrium of societies.

More recent criticisms consist of the rejection of the "absolutistic" (Douglas, 1967;1970) view of man and

society adopted by the functionalists. This rejection is based upon the inability of functionalist models, which are derived from those used in the physical and biological sciences, to answer behavioural questions. Such questions as: What is the process by which individuals arrive at the particular, and individual, manner in which they experience everyday life? (Berger and Luckman, 1966; Douglas, 1970; Garfinkel, 1967; Gouldner, 1970; Blumer, 1970; Manning, 1973; and others).

A substantial amount of the dialectic between functionalists and existentialists has centered around the study of deviant behaviour (Bordua, 1967; Matza, 1969; Douglas, 1970; Gibbons and Jones, 1971; Hiller, 1971).

Conventional sociology in America, structural-functionalism, has done little, it would seem, to correct a widespread and distorted view of the problem of poverty. This perspective has provided the major proportion of studies of the poor and may have, as some have suggested, been unduly influenced by those who financed their activities. The constraining effects of the positivistic nature of functionalism have been somewhat severely criticized by a number of scholars of whom Blumer (1970: 298) seems representative:

The approach presumes that a social problem exists as an objective condition or arrangement in the texture of society. The objective condition or arrangement

is seen as having an intrinsically harmful or malignant nature standing in contrast to a normal or socially healthful society. In sociological jargon it is a state of dysfunction, pathology, disorganization, or deviance.

The functional perspective, responsible for a considerable amount not only of the prevailing attitude toward poverty, but also official policy, is along the lines stated by Blumer. Researchers who adopt the functionalist perspective rely heavily upon both the impersonal empirical methods of the physical and biological sciences, and statistical data. Also, they take the current social order, which includes the economic system, as both a given, and normative. Consequently they consider any deviation from the values and expectations of this order, such as poverty, to be dysfunctional and symptomatic of individual pathology. And, as Homans (1964) points out, "It was never tired of asserting that its concern was with institutionalized behaviour, and that the unit of social analysis was not the acting individual but the role". In short, functionalists, and "conventional wisdom", view all behaviour which does not conform to the values and style of the "winners" in an open market economic system as dysfunctional, disorganized and pathological; a position which I seriously question.

The conventional or functionalist perspective within sociology accepts the producer-consumer society as rational and

normative and views individuals who consume, but do not produce, as disruptive or dysfunctional with respect to the remainder of society. If individuals not only do not produce, but also live in poverty and require public assistance, they are viewed as constituting social pathology because their norms are contrary to the values and best interests of the productive majority. The aged poor represent a social problem for the rest of the society. And, as Becker correctly informs us, illustrate that a social problem is what those with the power to mould public opinion in the mould of their own interests say it is. It is **not** necessary to belabor the point that the aged and the aged **poor** are not only problematic to the rest of society in the United States but will always be so while the present economic system obtains. To talk of eliminating poverty is **not** only false propaganda but irrational, and bad sociology when undertaken solely from the functionalist perspective. I am not proposing that a new perspective should replace existing ones but that there should be a synthesis because the efficacious potential of the sociological endeavor can only be realized when partisan politics **are** set aside. As Douglas (1973) correctly points out, sociology is dependent upon both the analysis of social structures and the analysis of social situations. A position which this thesis intends to support.

Existential Sociology: The Additional Perspective

A comprehensive understanding of the newly emerging sociological perspective of existential-phenomenological sociology, together with an appreciation of some of its potential for research, is essential to the major theme of this thesis. It requires an examination, not only of differences in methodologies and theoretical positions which have given rise to a dialectic, but also the more fundamental philosophical shift which is taking place within sociology. It is because of the highly significant nature, and the many implications, of this shift, that I will discuss some of the philosophical contributions which have resulted in the development of an existential aspect to sociology.

I propose to provide a limited philosophical framework within which to locate the two perspectives of functionalism and existential sociology (existential sociology, from this point on, will imply the longer but synonymous term of existential-phenomenological sociology). I will also explore some of the major characteristics of ethnomethodology, a sub-category of the existential position, with a view to providing at least a few tools with which to discuss the research presented in chapter 3.

The Framework

Existential sociology represents a rejection of the exclusive claims, and the constraining effects, which the philosophical tradition of logical-positivism has had upon the work of those operating within the structural-functional perspective. Existential sociology is also a reconsideration of the validity, and necessity, of including subjective data when studying human interaction. This is, of course, in the spirit of Descartes, the existential tradition of Kierkegaard, Heidegger, Nietzsche, Sartre and others, and perhaps most significantly the phenomenology of Edmund Husserl. It is most evident that existential sociology demonstrates a radical shift in the base of the sociological enterprise and provides the major axis around which a large amount of argumentation will revolve.

A Perspective

A perspective is a particular way of looking at an object or an event. Anthropology, psychology, sociology, physics and biology all represent differing perspectives from which to look at man and the universe. Each attempts to gather its data in an orderly and systematic manner in order to provide explanations, and so give meaning, about natural and social phenomena. However, any particular

perspective is only capable of providing the observer with a minute view of the whole. Also, such a limited view will correspond to the a priori conditions and expectations of each perspective or discipline. This means that the piece of reality which is perceived will, in part, be shaped by such conditions and expectations; as they will also shape the meaning which is assigned to it. This fact constitutes a large part of the argument which existential sociology has with functionalism. Whereas functionalism limits its subject matter to those parameters which include only data from the objective world, as do the physical and biological sciences, existential sociology includes both objective and subjective data. The necessity of including both forms of data is critical to the existential perspective which adopts the position that each piece of reality that is given in experience, and the meaning assigned to it, must correspond to the conditions of all possible experience; a position which can best be understood by referring back to the semantic distinction which came between Descartes and Locke; a matter of philosophy.

The Everyday Life of Human Existence

Everyday life has been shaped, to a large degree, by the philosophical developments which have taken place over a considerable period. Culture and society are the

objective expression of many of the ideas, beliefs, and knowledge which philosophy has furnished. Philosophers in studying the nature of man have frequently pointed out that he of all other animals experiences his existence as problematic; an observation which formed the focus of attention for the existentialist philosophers.

In contrast to infra-human animals, the evidence seems to indicate that man has, to a considerable degree, experienced his peculiarly human existence as being problematic.

In spite of the gulf that separates our modes of experience and thought from that of the mythopoetic world of primitive man, our literature, religions, and numerous other aspects of everyday life, indicate that man is still preoccupied with questions about the meaning of his "being-in-the-world": existence, human contingency, freedom and decision-making, and death. The search for answers to the problems which constitute existence is sometimes referred to as the problem of "identity". Ruitenbeek (1964: 15) suggested that the problematic nature of existence prompts such questions as: Who am I? Where am I going? Do I belong? What is the meaning of my life? In view of the widespread social problems of crime, suicide, drug abuse, political corruption, poverty, boredom and apathy, one

might add the further question, "Do I want to belong?"

All of these questions seem to be particularly relevant to any study of the aged poor.

Some Elements of the Problem of Existence

Man, in common with all other organisms, is required to act upon and react to the natural world if he is to survive and continue the species. There is abundant evidence that he has been the most successful of all animals in this undertaking (Beals and Hoijer, 1971). Again, in common with some animals, man is capable of emitting a wide range of articulate sounds. However, man alone is capable of investing these sounds with conventional meanings and so creating words, or abstractions, which become signals for action, signs for objects, events, and experiences. The ability to codify everyday life, communicate, share experiences of reality, assign it meaning, recall the past, anticipate the future, work with mental images, are all unique to man. All of these operations contribute to man's sense of self-awareness and the sentient aspect of his nature. Reflexivity, sentience, intentionality, and goal directed rationality (Cf. Manning, 1973: 12-27) are essential ingredients of the problematic of existence. These represent the focus for existential sociology and provide the data of subjectivity. In short

only the inclusion of both objective and subjective data can adequately account for the way in which an individual locates himself in the world, acts, and interacts.

The natural world of things and infra-human organisms is, by and large, constant and predictable. This is not the case with human interaction. The subjective or mental world of man, into which flows a constant stream of stimuli in the form of new physical sensations, knowledge and ideas, is in a state of continual change. It is within the eddying currents of mental activity that the problematic elements of existence are formed; they are discrete and incapable of direct observation and measurement, yet are as substantial in effect as the elements of the natural world. It is through the cognitive processes of perception, reflection, evaluation, and judgement (Farber, 1966) that man becomes aware of his dual nature: he stands together as a part of the natural world and also apart from it, solitary, alone, faced with the task of making choices, the consequences of which are his responsibility alone, and generating the peculiarly human affect of anxiety. Anxiety, in the existentialist view, is the pain of despair, futility and absurdity, which is human existence (Sartre). Phenomenological, or existential sociology, takes this subjective reality and expands it into the reality of everyday life and

pursues its many dimensions. Its exponents ask questions regarding its processual nature and the differential of meaning which is generated. What are the conditions of possible experience which lay behind the final expression in social conduct? Herein lies the crux of the dialectic between functionalism and existentialism.

Functionalists, modelling their activities upon the empirical methods and theories of the physical world, that is the world of objects and infra-human organisms, exclude the possibility of layers of previous experience, and the deep rules of structure which may determine behaviour. How does the contrast of perspective arise? The answer, or a major portion of it, can be traced back to 17th century philosophy.

The Philosophical Seedbed of Functionalism and Existential Sociology

Although functionalism and existential sociology represent two contrasting perspectives within the same discipline, their roots are set in common ground: 17th century empiricism. The atomistic-reductionist philosophy of John Locke, the rational-analytic introspection of Rene Descartes, and the principles of Newtonian physics, gave birth to both. Both Locke and Descartes believed that the time had come for a scientific study of the human mind. However, they differed in their opinions as to how this

should be undertaken. Locke rejected Descartes' notion that the mind could be best studied through its actual contents, yet both were empiricists. The difference in approach arose out of their selective interpretation of what was meant by the term "empiricism." While it is true that empiricism is related to experience, the single English word represents a translation of a German term which has two distinct levels of meaning: Erlebnis which refers to that which is observed and experienced in the immediate present; and Erfahrung which refers to all experiences which have accumulated prior to the present experience. Locke would permit only data drawn from Erlebnis while Descartes included data from both Erlebnis and Erfahrung. (Wann, 1964). The influence of Newtonian physics on Lockes' limitation is obvious. Newton had been painting a broad picture of a mechanical universe consisting of particles of matter which responded to impersonal forces according to fixed rules, and in a constant and predictable manner. Using the Newtonian model Locke proposed a reduction of consciousness to simplistic, mechanistic stimulus-response combinations. However, the inclusion of data from both levels of experience, objective and subjective, was later seized upon by Kierkegaard and expanded into the philosophy of existentialism.

Existential Philosophy

Although it is certainly preferable that I introduce existentialism by means of a neat, precise, definition, an attempt to do this represents something of a hazard. This dilemma is partly brought about because definitions are concepts which we usually associate with more logical and empirical operations. In dealing with existentialism we find we are engaging with abstractions: notions such as existence, contingency, freedom, and the making of decisions. Someone once remarked that the problem of defining existentialism was rather similar to that of defining an odor or a flavor. Basically, existential philosophy asks questions which were once addressed to religion concerning the nature and meaning of the universe and the existence of man. In part, existentialism is a form of humanism (Sartre, 1948). The existentialists were engaged in "endeavors to analyze the basic structures of human existence and to call individuals to an awareness of their existence in its essential freedom" (Molina, 1962: 2). The core of existential descriptions is ontological; that is, the structures of human existence, and it takes the individual as its subject-matter in contrast to the focus of phenomenology which is upon the whole unit, for example collective man or society.

The Danish philosopher and theologian, Soren Kierkegaard is usually credited with being the founder of existentialism. His philosophical system is revealed in his cryptic statement that "truth is subjectivity," which in itself is an ontological notion. Kierkegaard lived in an age when men had become dissatisfied with religious answers concerning meaning and represented the general dissatisfaction when he raised such questions as, What is the point to man's life? What is the purpose of human events? He concluded that human existence was pointless and absurd; that of himself man could produce no answers to such existential questions. That there were no certainties: human existence was highly contingent; that man was a free being, and required to be continually making decisions because he ought to (a moral problem), and yet when he had made them he had no way of knowing if they were the correct ones. But he was still responsible for them. For Kierkegaard the only answer was the absurdity of the "leap of faith," God, and even this could be a leap of "bad faith", to use Sartre's term. Those who followed, Jaspers, Heidegger, Camus, and Sartre all echoed his pessimism: existence was pure despair and ended in the peculiarly human affect of anxiety and guilt. However, in spite of the pessimism and despair of existentialist philosophy it did provide several critical elements which are significant

in existential sociology. First, by the notion of freedom; each individual is unique, no two persons come out of the same mold (Nietzsche). Every individual must do his own existing and dying, human existence is not transferable. It also provides us with the paradox that while man is apart from all other men, he is also a part of all other men. Social life involves man and forces upon him choices which he must make. The individual who refuses to choose fails to exercise his freedom and experiences nausea (Sartre) and is not an authentic human being. Secondly, by the idea of the importance of emotions and sentiments in the 'construction of social reality', that man must recognize the social forms and meanings in everyday life as something that grows out of individual existence, emotion, and feeling. Therefore, for the existentialist an analytic requirement is to find out how individuals make choices and find meaning within a social situation, to understand how specific situations are read and understood; identify the process by which social forms come into being and how the individual defines and defers to social forms. A major reflection of the existentialist tradition in existentialist sociology is the problem of how it is that an individual can be an autonomous, differentiated element in society and also a collective and integrated one.

1

Phenomenology

Edmund Husserl, German philosopher and mathematician, is usually credited with initiating the phenomenological movement, although he was considerably indebted to Brentano, (Q.Lauer, 1958;Farber,1966;1967;Solomon,1972). Husserl's work is characterized by his efforts to establish a "science" of philosophy and to demonstrate the "objective validity of the foundation principles of mathematics and natural sciences, epistemology, and ontology, (Solomon,xi)

Both movements have a common concern with the relationship between human consciousness and the external world of nature and society. They are particularly interested in the ontological structure which is assumed as underlying this relationship. However, Husserl was chiefly concerned with epistemological problems and identifying the a priori principles of human knowledge and belief: universal structures. Existentialists, on the other hand, also asserting the primacy of first person experience or the need to analyse one's own consciousness of the world, rejected that such an undertaking could ever become a scientific study.

Phenomenology commences with an attempt to identify and define those structures of consciousness that are essential, and universal, to every form of experience.

For this purpose Husserl took as his subject matter 'intuitive phenomena': the content of transcendental subjectivity or the standing apart mentioned earlier. He claimed that in order for the results of phenomenology to be absolutely true it was necessary to set aside or bracket out all previous presupposition and prejudices, real or imaginary, about the nature of the world. It was essential to the enterprise that all experience be described from the first person standpoint; describe one's very own world of meaning, or that which stands behind the objective or "out-there" world.

EXISTENTIAL SOCIOLOGY

Existential sociology is a recent perspective which is being developed for the purpose of studying human conduct, the meanings which are assigned it, and the processes by which it becomes possible. The movement represents a shift from the models of positivism, and the inclusion of discrete, subjective data. Spokesmen (Garfinkel, 1967; Goffman, 1959, 1963a, 1963b, 1967, 1970, 1971; Cicourel, 1973; Douglas, 1970; Manning, 1971, 1973; and others) for this perspective stress the significance of the actor's interpretations of reality and the need for their inclusion, when engaged in any study of interaction; they are of course, following the traditions we have been tracing in

this paper. Natanson (1966; 1967; 1968) directs attention to the link between the phenomenology of Husserl, existentialist philosophy, and the recent developments in existential sociology provided by the work of Schutz (1962; and 1964). Alfred Schutz, 1899-1959, philosopher and sociologist saw the major focus of the social sciences as being the study of every day life and the commonsense meanings which individuals shared, and at the same time took for granted. Natanson, in D. Sills, (1968: 72) points out that:

His principle philosophical work consisted of the application of Edmund Husserl's phenomenology to the problems of social reality, while his major methodological contribution was an attempt to relate phenomenological concepts to the sociology of Max Weber.

Following Husserl, Schutz questions the a priori presuppositions of empiricism and raises the issue of the problematic nature of its epistemological foundation. He seriously questioned the premise that if one individual were to change places with another that they would both perceive the world in essentially the same way. Schutz proposed a clear cut distinction between the two terms "action" and "act". In his opinion action was grounded in the cognitive processes of perception, reflection, judgement, and intentionality. An act, on the other hand, is grounded in the subjectivity of an individual and involves emotions and sentiments, both being essential to the overt or covert

products of conduct. For Schutz, intentionally refraining from acting was just as much an act as overt behaviour.

Schutz concluded that in order for an observer to grasp the full meaning which an actor assigns to his conduct it is essential that subjective data be included in the analysis. He suggested that models based upon those of science were inadequate for the task because their subject-matter was restricted to first degree constructs and made no provision for dealing with the second degree constructs of the social sciences: "objects that are not only themselves in a world but also have a world," (Natanson, 1968: 73). In short:

The human beings who are the central concern of the social scientists are interpreters of their own lives and actions (ibid.).

Ethnomethodology is a sub-category within the general existential perspective. It has not experienced a ready acceptance within the discipline but has generated a considerable amount of controversy (Bass, 1970; Hill and Crittendon, 1967; Wallace, 1968; Coleman, 1968, and others). The critics direct attention, among other things, to the difficulty the exponents of ethnomethodology experience in stating precisely what the term means, what ethnomethodologists do and just how they go about doing it. The reason for the difficulty and the controversy is a philosophically based one which should be obvious by now.

However, as the spokesmen for ethnomethodology (Garfinkel, 1967; Cicourel, 1973; and others) have attempted to point out, existential sociology is but another perspective from which to study society. They claim that other perspectives, alone, have been unable to answer such a significant question as: How is social order possible? and that this is a fundamental question for sociology and one which should be seriously addressed.

Ethnomethodology attempts to do just that, and is presently being developed to examine the structures and processes which underlie the taken-for-granted-everyday-life of social order. Functionalists take the social order as a given. Ethnomethodologists do not, but seek to penetrate it.

The focus of ethnomethodology is the language of the face to face relationships of everyday life. The reason for selecting this focus becomes clearer when we consider the implications of a statement made by Manning (1971: 4). He points out that the ethnomethodologist considers "that the study of language and the study of society are integral, insofar as they both study action and meaning in order to examine how language defines and shapes behaviour." The reasoning behind this position involves the concept of "intentionality".

"Intentionality is a major concept in the existential approach to social interaction, as it was in both Husserlian and existential philosophy. Husserl, following Brentano, posited as his major thesis that human consciousness is intentional; that it must always taken an object and that there is not act of consciousness that is not always directed toward an object or an event, real or imagined. In short, there is an essential correlation between human conduct and an object or an event; all objects or events are the object of an act or acts. Therefore, there is no distinction between the process of consciousness and the object of consciousness. This is the position adopted by the ethnomethodologist in contrast to the functionalist stance. Functionalism posits that social order is non-problematic (Manning, ibid.) and makes "Man a passive recipient of social pressures, forces, and ideas existentialists assert that human action, based upon the awareness of individual actors, can shape and bend the sociological *deus ex machina* implied ..." (Manning, 1973: 8)

As an outline for a paradigm for ethnomethodology I suggest the following would be representative: "Experience is largely symbolic experience," (Manning, 1971: 13). This symbolic experience takes the form, in the main, of verbalizations in face to face situations for the purpose of communicating shared meanings. It is this communicating

that establishes, and maintains, social relationships which in turn constitute the underlying structure of social order and thus make it possible, Therefore, it becomes evident that the ability to identify and conceptualize each part of the process which leads to social order provides a viable perspective for understanding how social order is possible, how it is negotiated and understood, together with a systematic framework from which to better establish an etiology of the many social problems which beset society.

Because "the center of man's life is himself" (ibid:10), and it is "from his own position, physical, social, and mental, he looks out on the world around him", and it is man who endows the world, and events within it, with meaning, the significant contribution which existential sociology can bring to the discipline as a whole becomes evident.

Research adopting the existential perspective has already made many valuable contributions to our understanding of how people negotiate everyday life and the meaning which they derive from, and give to, it (Douglas, 1970a, 1970b; Lyman and Scott, 1970; Sudnow, ed., 1972; and others). The piece of conventional research which follows is intended to demonstrate some of the limitations of the conventional approach to a social problem, and suggest how an existential perspective may assist us to enlarge our

understanding and move toward more constructive efforts in combatting them.

CHAPTER 3

THE RESEARCH

In the research which is to be described in this chapter I commenced the study of the elderly poor in Southwest Detroit by designing my research model within the theoretical and methodological frameworks of conventional sociology. The survey was intended to employ the quantitative method with statistical and demographic data providing the major portion of the information from which the problems of the elderly would be identified and analysed. I began the research armed with certain major pre-suppositions drawn from conventional sociological theories and studies, and organized the mechanics of the survey in the traditional manner. This perspective and method proved most useful in locating the elderly in Southwest Detroit and providing a lead into their study. It resulted in an outline in the conventional manner of demographic and class terms of an aggregate of people in a defined geographic location. However, as the survey proceeded anomalies and obvious contradictions began to appear in the data being generated. While the characteristics of the physical community were as expected, as were the physical conditions under which many of the elderly lived, the faceless aggregate began to

take on difficult and annoying individual, unpredictable, and ambiguous, features not accounted for in my theoretical base, and for which my methodology did not provide. It became increasingly obvious that we were encountering data which, while it appeared to be both plentiful and significant, we did not have the tools to incorporate into our study. Anticipating serious problems in the interpretative phase of the research I began to consider additional tools with which to handle these unexpected research problems. Existential sociology was the additional tool finally chosen because it alone was capable of dealing with the generous amounts of subjective type data being generated during the interviews conducted. At this point I decided to change and broaden the original theoretical and methodological bases of the research, and as will become obvious, also change the focus of the study.

History of the Study

In October of 1971 I was invited to undertake a pilot study of the elderly⁴ living within the Detroit metropolitan area known as the Southwest Community⁵. The invitation was extended by a division of the Presbytery of Detroit, a judicatory of the United Presbyterian Church

⁴For the purpose of this study "the elderly" will designate persons aged 65 years or more.

⁵See Map 1

in the U.S.A.

The stated purpose of the study was: To identify the street blocks in the subcommunities of Springwells 163, Chadsey 153, Cadillac 162, and Fort Wayne 161, which contained the highest population density of persons aged 65 years and over; and to determine the most pressing needs experienced by individuals within this age category.

When interviewed, the sponsors of the study explained that both general knowledge, and studies which they had read regarding the nature and problems of poor communities, had led to their making certain assumptions about Southwest Detroit. The community was most probably highly disorganized, poverty ridden, and lacking in social organization.⁶ The people, they assumed, would be mostly apathetic, dis-interested in the community, desperately in need of money, under-nourished, very discontented, and exhibit a life style and values greatly different from individuals living in higher income areas. It should be noted that the Presbyterian Church is led by a highly educated clergy drawn from the middle and upper-middle classes and serving a membership drawn from these higher income classes.

⁶A typical conventional perspective.

The Southwest Detroit Community

Following the First World War the Southwest Community was a rapidly expanding, economically stable, prosperous, upper-middle class, residentially desirable, section of metropolitan Detroit. West Grand Boulevard was considered to be the outer perimeter of the city.

While some of the churches in the area were organized in the period preceding the war, many more were organized in the immediate post war years, and all shared in a rapid growth in membership and financial support. The peak growth appears to have occurred about 1935, from which point the community became relatively stable until the early 1940's. For example, the United Presbyterian denomination in the area had a total membership of over 5,000⁷, a contrast to the membership of approximately 700 in 1971.

At the close of the Second World War membership had declined to an all-time low of some 800, many of whom were considered as inactive. Today, many of the once flourishing churches which served a prosperous upper-middle class community have either closed or been joined into one center.

⁷The information concerning the Presbyterian church was obtained from perusal of historical documents and official records.

In the last two decades numerous store-front, fundamentalistic, type churches have sprung up throughout the area, and appear to serve the emotional needs of the black and Spanish speaking migrants who are flowing into the area in increasing numbers.

Southwest Detroit is considered by the wider community and city officials as being an economically depressed, commercial-industrial, racially and ethnically diverse, residentially undesirable, area with a high crime rate and having a large number of medically indigent.

Demography

The geographic area known as Southwest Detroit⁸ is defined under the two most commonly used systems listed below. The subcommunity system and the region system are used by the United Community Services organisation and the Detroit Department of Public Health respectively.

<u>UNITED COMMUNITY SERVICES⁹</u>		<u>DETROIT DEPARTMENT OF HEALTH¹⁰</u>
Michigan	021	Region A
Ford	152	Region C
Chadsey	153	Region C
Fort Wayne	161	Region B
Cadillac	162	Region A & B
Springwells	163	Region B

⁸See Map 1

⁹See Map 2

¹⁰See Map 3

The area bounded by the regional system includes a slightly larger geographical area than that bounded by the subcommunity system, and includes an additional 40,000 persons. Because data were required from both systems I have illustrated their relationship by means of maps¹¹.

The total population of the above subcommunities is approximately 144,546 persons, of which some 16,308 are aged 65 years or more, representing 11.2% of the total population of the subcommunities. Southwest Detroit is a predominately white population of very mixed ethnic, religious, and cultural traditions, and has over the years, experienced a number of waves of migrants coming into the area. These migrants came from the British Isles, Canada, and Central Europe in the early part of this century; the cities of the southern United States in the nineteen-thirty's; from Appalachia and the Near East after World War II; and Latin America during the last decade. Of the total Southwest Detroit population, some 144,546 persons, 33,500 are classified as nonwhite. Appalachian whites comprise approximately 40% of the total. The black population is located in the subcommunity of Ford which is 58.1% black, and the subcommunity of Fort Wayne which is

¹¹See Map 4

31% black. Table 4 below illustrates the diversity of the backgrounds from which the population came.

TABLE 4

PARTIAL BREAKDOWN OF DOMINANT POPULATION COMPONENTS^a

Nativity, Parentage, and Country of Origin	Subcommunity				
	Springwells	Cadillac	Fort Wayne	Chadsey	Ford
ALL PERSONS	22,416	33,614	11,203	30,236	21,895
Native of native parents	14,596	22,390	8,278	16,197	17,350
Foreign born	3,009	4,457	1,178	5,086	1,437
Native of foreign or mixed parentage	8,811	6,767	1,747	9,025	3,108
FOREIGN STOCK:					
British	2,098	2,198	267	1,183	411
Western Europe	765	663	114	745	336
Central Europe	1,645	1,933	1,781	9,144	2,682
Mexico	847	3,234	408	468	286
Persons of Spanish Tongue	2,274	6,267	976	1,413	996

^aSource: 1970 Census

Tables 5 and 6 are a simplification of Table 4 and illustrate the dominant component of each subcommunity.

TABLE 5

DOMINANT FOREIGN COMPONENT BY SUBCOMMUNITY^a

Country of Origin	Subcommunity				
	Springwells	Cadillac	Fort Wayne	Chadsey	Ford
British Commonwealth (White)	2,098	2,198	267	1,183	411
Central Europe	1,645	1,933	1,781	9,144	2,682
Mexico	847	3,234	408	468	286

TABLE 6

WHITE, NONWHITE COMPONENTS BY SUBCOMMUNITY^a

	Subcommunity				
	Springwells	Cadillac	Fort Wayne	Chadsey	Ford
Number of white	21,957	31,303	7,806	28,697	9,175
Percent of total	98.7	93.3	69.0	94.7	41.9
Number of nonwhite	289	2,248	3,507	1,606	12,723
percent of total	1.3	6.7	31.0	5.3	58.1

^aSource: 1970 Census

It is apparent from the above tables that something resembling

racial and ethnic enclaves may exist within Southwest Detroit, each with its own set of traditions and life style. If such a situation exists, we could expect to encounter a rather divided community with a very localised sense of belonging, a provincial morality and distinctive networks of communication.

Within the five subcommunities (omitting Michigan) there are about 119,314 persons of whom some 12,430 are aged between 55 and 64 years, and another 13,900 are aged 65 years¹² or more. I believe the similarity of the figures to be significant with respect to the planning of any community project involving the elderly. It appears that the elderly population already has its replacement ready at hand.

TABLE 7

DISTRIBUTION OF PERSONS 65 YEARS OF AGE AND OVER BY SUB-COMMUNITY^a

	Subcommunity				
	Springwells	Cadillac	Fort Wayne	Chadsey	Ford
Number of persons	2,733	4,026	1,166	3,950	2,025
Percent of the total subcommunity	12.3	12.0	10.0	13.0	9.2

^aSource: 1970 Census

¹²The sponsors did not require Ford to be included in the study.

Within the subcommunities of Springwells, Cadillac, Chadsey, and Fort Wayne, the highest concentrations of persons over the age of 65 years are to be found in the following four areas:

Area No. 1	North - Dix Highway
	South - 175 Freeway
	East - Livernois Avenue
	West - Woodmere Avenue
Area No. 2	North - Michigan Avenue
	South - 175 Freeway
	East - 175 Freeway
	West - Clark Avenue
Area No. 3	North - 194 Freeway
	South - New York Central Railroad
	East - Livernois Avenue
	West - Howels and Joe Streets
Area No. 4	North - Fort Street West
	South - Jefferson Avenue
	East - Calvary Avenue
	West - Detroit City Limit

Housing

Dentler (1967:304-308) reports that ecologists have found that the value and quality of housing "is distributed along a gradient, so that most of the best housing is located in the newest, most distant sectors of the community, and the worst is clustered, for the most

part, in the oldest, most central areas." This is the situation in Southwest Detroit where practically all the housing is old and has a median value of \$8,439. Dentler (308) focusses attention on the major problem encountered in this study when he states that:

All but about one fifth (of the elderly) lack the income and physical strength to maintain the shelter they may have inhabited for many years. Internal deterioration often combines with neighborhood change, often blighting, to leave aged persons with depreciated housing that does not fit their needs or the levels of living.

Southwest Detroit, a long established residential area on the edge of the central city, has over the years become increasingly industrialised. The area is now being planned for almost total industrialisation. This means that little, or no, encouragement is given to current residents to maintain or improve their property. Rezoning has already taken place in anticipation of the planned industrialisation.

According to a Population and Housing Survey conducted by the City in 1969, some 60% of all dwellings were considered to be in a deteriorating condition while some 7% were classified as dilapidated. The dwellings located within the subcommunities under study in this paper were rated among those of lowest median value of all homes in the metropolitan area. The one exception was Springwells where the housing was rated as below average. The ratio of

dwellings occupied by nonwhites as against whites is among the highest in the state.

TABLE 8

SELECTED HOUSING CHARACTERISTICS BY SUBCOMMUNITY

Subcommunity	Median Value of Dwellings	Median Monthly Rent
Springwells	\$11,225	\$78
Chadsey	10,106	75
Cadillac	10,058	75
Ford	8,697	68
Fort Wayne	7,959	65

Economics

According to the 1970 Census; and data compiled by the United Community Services organization, persons living in Southwest Detroit are in the lowest income group in the metropolitan area, have more families receiving an income of less than \$3,000 per year, more aid to dependent children families, and more unemployed persons. Economically, the area is rated as one of widespread poverty.

Health and Health Care

Ill-health is a most complex issue. The only meaningful way to study the problem is to recognise the multifactorial chain of events which often lead to chronic illness. There may be numerous contributing factors -

income, housing, nutrition, education, stress of all kinds, occupation, pollution, age, distance from health care facilities, lack of preventative care in earlier years, family history, race, cultural background, to name but a few. All of these factors can be seen at work in Southwest Detroit, and it comes as no surprise to find that the residents of this area experience a high rate of chronic illness as compared to the rest of the city.

Data drawn from the 1969 Census conducted by the Detroit Department of Health lends support to the expectation that such a situation would exist, and does.

Delaney (1972) came to the conclusion that the residents of Southwest Detroit probably experienced a higher incidence of disease than any other community in the metropolitan area. The data generated by the Department of Health supports her conclusion. Delaney (22) believes:

The health problems endemic to the city of Detroit are, for the most part, even more significant in the Southwest area....a large number, possibly over 50% of the Southwest area may be classified as medically indigent. However, when considering the young family and young adults in Southwest, then the medically indigent population approaches 65% of the total population.

From the statement made by Delaney it would appear that the elderly constitute a large proportion of the 50% indigent figure.

Delaney further suggests that the high rates of illness are, in part, due to poverty, ignorance, poor

housing, inadequate nutrition, inadequate preventive medicine, and especially the lack of comprehensive medical care facilities within the Southwest area. A study of all facilities offering medical care within the area revealed that:

The only hospital facility capable of meeting¹³ major health care needs of Southwest Detroit is Ziegler Osteopathic Hospital. However, a 161 bed hospital could not begin to meet the health care needs of over 191,000 people. Therefore, the community has the alternative of utilising facilities incapable of meeting their health care needs or going outside Detroit.

The question immediately raised is, if one is sick, poor, and elderly, how does one go outside Detroit?

Delaney(33) sums up her study by stating that:

The most glaring and appalling conclusion to be drawn by this study is the tremendous need for adequate health care facilities in Southwest and the large number of very serious health problems that exist.... It is incomprehensible that in this age of knowledge and technological explosion, supposed concern for our fellow man, and daily medical advance that such conditions should exist....Comprehensive care is available to modern man and he should be receiving it....(in Southwest Detroit, this is not so....Pneumonia causes death at a rate of 140% above the city average. This is a disease relatively easy to care for with proper medication and medical supervision; a disease here in Southwest that reeks its devastating effects on the very young, elderly and infirm.

In the whole of the Southwest there is only one Public Health clinic - the CHASS Centre at 5695 West Vernor

¹³Delaney, 22.

Avenue. However, this clinic is operated on an appointment only basis and there is a waiting period of one month for an appointment with a nurse or doctor. The clinic is only a pilot project and serves some 25% of the total area.

A study conducted by the United Community Services organization in 1972¹⁴ only adds to an already dreary picture of health, and health care, in Southwest Detroit. The findings of this study are summarized below.

1. Conflicts in public policy at national and state levels perpetuate a "two-class" system of separate and often unequal health care for the poor in Detroit and most other urban centers.

2. There is a confusing array of Federal health legislation directed to special or low income population groups which causes fragmentation of services and inhibits health planning.

3. The process of applying for Federal health funds is often confusing due to the welter of authorities and categorical approaches. This also prompts local health agencies to adjust their programs to where the Federal money is, without regard to local priorities, and no mechanism exists to permit a pooling of funding resources.

4. Restrictive Medicaid and Medicare regulations limit the range of available benefits, particularly payment for home health care as an alternative to hospitalization. They also eliminate many indigent groups who should be eligible for assistance.

5. As a result, many people with incomes just above public assistance levels fall "between the cracks" and have serious difficulties in obtaining and paying for medical care. The rising costs of health care place

¹⁴Health Care in Metropolitan Detroit: Programs, Plans A Review by Committee on Individual Health Care, United Community Services of Metropolitan Detroit, 1972, 2-3.

needed services out of the reach of an ever-increasing number of such families.

6. Health services in the Metropolitan area are unevenly distributed and frequently furnished at the convenience of those who provide them, with many under-served areas where health care is not easily available or accessible....

Ill-health and inadequate health care facilities are a major problem in the Southwest area of metropolitan Detroit. Public transportation is limited and does not reach into the areas where the elderly are located. Map 5 indicates the number and location of medical practitioners.

TABLE 9

DISTRIBUTION OF PHYSICIANS, OSTEOPATHS AND DENTISTS^a

Subcommunity	Physicians	Osteopaths	Dentists	Population
Springwells	1	5	4	22,246
Chadsey	16	7	5	30,303
Cadillac	16	10	7	33,553
Ford	1	2	6	21,898
Fort Wayne	0	0	2	11,313

^aSource: 1970 Census and United Community Services

When considering the distribution of practicing physicians it is most important to note that:

Physicians in private practice are unevenly distributed¹⁵ throughout the tri-country area. The UCS Health and Manpower Study identified a scarcity of physicians in Southwest Detroit....Only 20% of the M.D.'s in the Tri-country area are general practitioners or internists; 66% of the D.O.'s are in general practice.

The subcommunities in the above table are arranged in descending order of socio-economic status. The subcommunities of Ford and Fort Wayne are the areas with the highest black population. The ratio of physicians to subcommunity population is lowest in the subcommunities of lowest socio-economic status which are also those with the highest population of blacks.

THE SURVEY

The Survey Site

The subcommunities of Springwells 163, Chadsey 153, Cadillac 162, and Fort Wayne 161, were selected by the sponsors as constituting the areas in which they were particularly interested and for which they had assumed responsibility. The population of all persons aged 65 years and over, and those aged between 55 and 64 years, was checked for every Census Block and every Census Tract in each subcommunity. The six Tracts indicating the highest population density of persons aged 65 years and over were

¹⁵Health care in Metropolitan Detroit, 10

selected for each subcommunity. The next step was to select the six Blocks within each Tract, in each subcommunity, which indicated the highest population of persons aged 65 years and over. Map 6 illustrates these Tracts and Blocks. A large map of the total area was obtained from the City Planning Commission, cut into the four subcommunities being studied, and reduced to quarto size.

The Blocks of highest density were then marked in and formed part of each interviewers kit. The subcommunity of Ford has been included in some of the tables only because it proves useful when discussing some of the problems of the Southwest area. Ford is approximately 58.1% black and of low socio-economic rating.

The Research Sample

The sample population was located in the twenty four Census Blocks selected as explained above. The interviewers were expected to visit every dwelling in all of these Blocks and request an interview and administration of the questionnaire. However, the interviewers frequently encountered the problem of what appeared to be an unusually high refusal rate both with respect to being interviewed and answering the door.

TABLE 10

	Number	Per cent of Total
Total contacts attempted	1,242	100
Not at home, or no answer	177	14.3
Refused interview	229	18.4
Refused with abuse, or slammed door in face of interviewer	123	9.9
Claimed could not speak English	164	13.2
No elderly in dwelling	110	8.9
Too ill to be interviewed	35	2.8
Successful interviews	404	32.4

As indicated in the above table, of a total of 1,242 contacts made only 404 interviews were successfully completed, representing a success rate of only 32.4%. Of these 41.8% were with aged males and 58.2% with aged females. When these sex differences are compared with the national elderly population they provide a rough indication of the typical nature of the sample. Of all persons interviewed 91.1% were white and 8.9% were black. This ratio was disappointing and obviously skewed the results. However, it is significant that there was a high rate of refusal to be interviewed, and to answer the door, especially in the Community of Fort Wayne. This area had the highest percentage of blacks of

all subcommunities surveyed. It is 31% black. It is also reputed to experience a high crime rate. Southwest Detroit as a whole has a homicide rate of almost twice that of the city rate. Although black interviewers, both male and female, were selected to survey this subcommunity the refusal rate was still very high. These interviewers stated that they were acutely aware of a high level of fear and distrust, and expressed their own apprehension at working in the area.

The Interviewers

Eight interviewers were engaged for the administration of the questionnaire, a copy of which is included in Appendix C. . They were selected because of their extensive knowledge of the total area and the fact that they were readily recognized by many residents. In the Summer of 1971 all interviewers had conducted art and craft classes, and other recreational programs, with the young people on the sidewalks of Southwest Detroit. All interviewers were either final year high school students or at college.

The team consisted of one black female, one black male, and two Spanish speaking males, all of whom lived in Southwest Detroit. Two of the eight interviewers were white females, and two were white males, all four living outside of the area. The supervisor was a final year

university student who had been raised in Southwest Detroit. He claimed to be the nephew of the now defunct, and once infamous, Purple Gang which had once operated in the City of Detroit. His knowledge of the area, acute perception of such problems as aggression and hostility which could, and in fact did arise, and the ability to facilitate safer movement through the area certainly supported his claim. On several occasions interviewers were confronted on the street and ordered out of the area or face physical violence. On other occasions radical politically oriented Spanish speaking residents confronted interviewers and threatened violence if the team remained in the area. On these occasions both the supervisor and the two Spanish speaking interviewers were able to pacify the potential combatants. Time spent in bars located in distinct ethnic dominated locations was well spent. It became obvious that enclaves did exist and that there were well laid down boundaries over which other groups could pass only at a high risk of incurring bodily harm. In one bar located in an area which was predominantly Hungarian, members of the local police precinct, also of Hungarian descent, made frequent visits. I spent several hours in conversation with what turned out to be an off-duty policeman who informed me that any "nigger" who dared to stray into the area would be very lucky to get out in one piece. Levels of hostility, jealousy and fear,

ran very high throughout the whole Southwest area.

All interviewers were required to spend two complete weekends living in the Southwest Detroit United Presbyterian Church buildings. This requirement generated a team spirit among the interviewers and engaged them in lectures, seminars, and discussions. These were designed to increase understanding of the task at hand and hopefully increase both the effectiveness of the interviewing process and the validity of data generated. Several lectures were given in introductory sociology, survey and questionnaire techniques. The final day of training consisted of a visual study of the survey site, and the viewing of a series of films produced by the Ann Arbor Institute of Gerontology, University of Michigan.

Prior to the actual survey taking place, all interviewers conducted practice interviews in a location similar to that to be surveyed, but outside the immediate area.

TABLE 11

N=404

COUNTRY OF ORIGIN

Sub-community	USA	Mexico	E.Europe	W.Europe	Turkey	Italy	Malta	Cuba	Peurto Rica	Lebanon	British Comm. (White)
Chadsey .0153	41	-	10	1	1	-	1	-	-	-	-
Fort Wayne .0161	40	2	12	4	-	2	-	-	-	-	4
Cadillac .0162	107	9	14	-	3	-	2	1	1	2	7
Springwells .0163	93	3	16	5	4	3	1	-	-	-	15
Totals	281	14	52	10	8	5	4	1	1	2	26
Percentage of total	69.6	3.5	12.9	2.5	2.0	1.2	1.0	0.2	0.2	0.4	6.4

THE SURVEY DATA

Housing

Approximately 70% of the respondents owned their homes and had lived in Southwest Detroit for an average of 41.8 years. In view of the previous higher socio-economic rating of the area these respondents had obviously experienced downward mobility and the attendant problems of a deteriorating neighborhood. Freeways now surrounded the area on three sides, thus further isolating the community from the remainder of the metropolitan area. Interviewers noted that most of the homes they visited were in need of repairs, and required painting and yard-work to be done. Interiors were frequently ill-lit, required decorating, and contained dilapidated furniture. Some 92% of respondents stated that they experienced little difficulty in providing a home but that taxes and maintenance were extremely difficult items to cope with.

Independence, the probable reasons for which I will discuss later, was highly valued and responsible for many anomalies in the data. Although it was obvious assistance was needed, 69.6% of the respondents interviewed were quite adamant that they required no help whatsoever. Only 14.2% said they could use some repair aid, 13.3% wanted their homes painted, 3.7% indicated that domestic help would be

appreciated, and 6.6% would accept minor help with odd jobs. Generally there was a reticence to admit a state of need, yet the facts indicated help was needed.

TABLE 12

HOUSING ARRANGEMENTS	
N=404	Percent
Own home.....	69.1
Apartment.....	12.6
Live with family.....	6.4
Rent house.....	5.7
Single room.....	4.5
Hotel.....	1.0
Nursing home.....	0.7
Total	100.0

TABLE 13

Q.46 What Are the Most Urgent Things That Need to be Done in the Home?

Sub-comm-unity	Nothing nil response	Repairs	Painting	Domestic	Grounds	Elec.	Furn.
.0153	61.2	16.7	14.8	3.7	--	3.7	1.9
.0161	54.0	16.4	24.6	8.2	6.6	3.3	3.3
.0162	74.7	11.6	8.9	2.7	2.7	2.7	0.7
.0163	88.6	12.2	5.0	--	0.7	--	0.7
Mean	69.6	14.2	13.3	3.7	2.5	2.4	1.7

When respondents were asked what it was that they would most like to have done for them, 50.2% stated there was nothing they needed. When asked if they could cope with all daily living requirements an overwhelming 77.4% stated that they could cope adequately without outside assistance. Many respondents appeared quite threatened when asked this question. It is suspected that the implication was that outsiders might come in if they were unable to cope, thus representing a threat to autonomy and privacy.

The need for personal security, autonomy, and freedom, a secure place in which to retreat from a threatening and possibly hostile social environment, and one which had changed radically over the years, takes on added importance as persons grow older. Many of the interviews revealed that the elderly regarded their homes as more than just physical shelter. Their homes also represented a place where the world could be shut out and largely ignored; a place where freedom could be exercised, privacy enjoyed, and the remainder of life lived out among treasured personal belongings and memories. The attitude of the elderly both toward homes, which were deteriorating, and frequently too large for present needs, and those who sought to interview them appeared to be conditioned by the fact that any

alternative would deprive them of the only things of remaining value: a sense of identity, personal worth, freedom, choice, autonomy and a framework within which to establish some meaning for existence. This can only be presumed, of course, as the purely objective data pointed to what would otherwise be, in many situations, irrationality on the part of those who clung tenaciously to circumstances which must have proven extremely difficult to cope with.

Table 14 lists the needs and problems as perceived by the elderly themselves, but I feel that this is a very conservative measurement which tells a very small part of the whole story.

Economic

No questions were asked about the amount or source of income received. However, an enquiry was made as to the adequacy of income to provide health care, clothing, food, and accommodation. The results are recorded in the table 15 below

Again, this table indicates the discrepancy between apparent need and that perceived or admitted by respondents.

TABLE 14

NEEDS AND PROBLEMS AS PERCEIVED BY THE ELDERLY

N=404

Need or Problem	Times expressed, as a percentage
Health restricts activities	36.4
Loneliness	39.2
Boredom	34.7
Fear of crime	31.5
More visitors	36.7
More calls from the clergy	
Desire to travel	17.0
Desire for outings	12.8
Would like to work	4.4
Like to do craft work	2.1
MOST URGENT HELP REQUIRED:	
None required	64.4
Repairs	14.2
Painting	13.3
Domestic	3.7
Yardwork	2.5
Electrical	2.4
Furnishings	1.7

TABLE 15

Do you find that you have enough money for:

N=404

Percent

	Yes	No
Health care	84.6	15.4
Clothing	83.0	17.0
Food	86.0	14.0
Rent	91.7	8.3

Health

Chronic ill-health was the problem most frequently expressed and one which was anticipated in view of the data provided by the United Community Services organization and the Health Department of Detroit.

In response to the question, "What would you like most to happen to you today?", 24.6% responded that good health was their preference, and 36.6% admitted that ill-health severely limited their activities. Most of the elderly reported more than one ailment, but although mobility decreased with aging and failing health, the majority were still able to move about unassisted. The respondents generally gave themselves a fairly good health rating despite obvious symptoms that they may not in fact experience the health status they thought or stated they did.

It is important to note that the findings in Table 16 represent the older people's evaluation of their own health rather than the observation of experts. It is suspected that such an expert rating would rank much lower. The opinions given by respondents reflect just that, opinions and attitudes, the meanings of which would not be generated by this type of survey. Such meanings would be deep-structured and complex, and I suggest, largely determined by subjective criteria than by just physical variables such as income and community.

TABLE 16

AILMENTS OF MOST CONCERN TO THE ELDERLY

N=404

Ailment	Percent Afflicted
Poor eyesight	41.0
Blood Pressure	23.4
Heart condition	21.8
Arthritis	18.7
Hearing	16.1
Crippled limbs	15.5
Tired	13.2
Diabetes	10.5
Chest condition	9.5
Dizziness	5.9
Nerves	4.1
Total exceeds 100% because many respondents indicated more than one ailment.	

A very small percentage of respondents participated in any community programs conducted for the elderly although such programs were available throughout the community.

TABLE 17

Q.11 What Activities for the Retired Do You Take Part in?

N=404	Percentage in Each Sub-community				
Activity	.0153	.0161	.0162	.0163	Mean
Nil Response or None	70.3	82.8	81.5	72.2	76.7
Church Related	22.2	12.5	10.3	15.0	15.0
Park and Recreation	1.9	3.1	3.4	6.4	3.7
Unions, Clubs, Lodges	5.6	1.6	4.8	6.4	4.6
Totals	100%	100%	100%	100%	100%

A surprisingly large percentage of the elderly, nearly 60%, had not engaged in any particular hobby or recreational activity before retirement which may account in part for the present lack of interest in social activities. Religious involvement was also lower than expected. Some 73% claimed membership with some religious institution. However, it should be noted that only 61.4% of these claimed they attended church on a regular basis.

TABLE 18

Q.14 What Kind of Things Did You Do in Your Leisure Time Before You Retired?
 Q.15 What Kind of Things Do You Do in Your Leisure Time Now?

Activity	Percentages in Each Community									
	Before .0153	Now	Before .0161	Now	Before .0162	Now	Before .0163	Now	Before Mean	Now
Social events, sports, outdoors	24.1	14.8	35.9	17.2	40.7	19.9	52.2	29.3	38.2	20.3
Nothing, or just stayed at home	75.9	48.0	64.1	54.7	58.2	34.9	40.7	35.7	59.7	43.3
Knit, sew, quilt, crochet	13.0	16.7	6.25	9.4	5.5	13.0	9.6	17.1	9.6	14.3
Read	3.8	11.1	--	1.7	4.1	22.6	6.4	26.4	3.6	15.5
Rest or just sit	1.9	11.1	--	14.1	--	13.0	--	8.6	0.5	11.7
Garden or yard	--	11.1	--	4.7	--	8.9	--	12.9	--	9.4
Radio or T.V.	1.0	13.0	--	9.4	1.5	20.5	5.0	25.0	1.9	17.0
Odd jobs(paid)	--	5.5	--	3.1	--	0.7	--	--	0.0	2.3
Religion related activities	--	5.6	--	3.1	4.8	6.2	2.9	2.0	1.9	5.0

* Where totals are more than 100% respondents answered stating more than one activity.

TABLE 19

Q.17 What Special Things Would You Like to Do?

Activities	Sub-Communities : Percentages of each				Mean
	.0153	.0161	.0162	.0163	
Nothing, don't know	51.8	42.2	52.1	61.4	51.9
Travel	16.7	15.6	19.2	16.4	17.0
Outings	14.8	15.6	12.3	8.6	12.8
Work	5.6	1.6	6.2	4.3	4.4
Work on my house	5.6	7.8	--	--	3.4
Relax	3.7	4.7	--	--	2.1
Help others	1.9	1.6	2.1	3.6	1.3
Sew, knit, quilt	--	6.3	1.4	0.7	2.1
Die	--	--	0.7	0.7	0.4

Q.16 What Stops You From Doing More?

Health	29.6	37.5	41.1	37.1	36.4
Nothing	55.5	51.6	39.7	38.6	46.4
Age	5.6	--	5.5	12.9	6.0
Transport	3.7	3.1	8.9	6.4	5.5
Money	--	6.3	4.8	4.3	4.0
Nothing to do	5.6	--	--	0.7	1.6

* Where totals are more than 100% respondents answered more than one category or errors are due to rounding.

Social Relationships

The need for social relationships, and the friendships which they engender, can be expected to persist throughout the whole of life, and perhaps more so in old age. Close friends would supply the major source of emotional support, especially as aging is frequently accompanied by a reduction of family ties, and the loss of longtime friends through death. Loneliness can become a major problem for the aged unless they take positive steps to counteract it. Of all the respondents interviewed, 34.7% admitted to being bored, 39.2% lonely, and 31.5% afraid, or some combination of these three affective experiences. Only some 50% stated that they regularly received visitors with approximately 20% stating that they neither received nor wanted to receive visitors. The following table indicates that nearly one-third of all respondents did not enjoy their retirement experience, with 12.7% failing to respond.

TABLE 20

Q.32 Do You Enjoy Retirement?

Sub-community	Yes	No	NR.
.0153	64.8	29.6	5.6
.0161	60.9	32.8	6.3
.0162	46.6	27.4	26.0
.0163	73.6	13.6	12.8
Mean	61.5	28.9	12.7

Tables 15 and 16 indicate the significantly low level of interest in social and recreational activities both before and after retirement. Not only were many of the respondents lonely and socially isolated, but they indicated that they were going to keep it that way.

CHAPTER 4

DISCUSSION

In view of the change in focus and perspective which became necessary at an early stage in the study of the problems of the elderly in Southwest Detroit, I will not explore the implications of all the data generated. Instead I propose to concentrate on some of the difficulties and anomalies encountered because they appear to be of major significance in the everyday life of those interviewed, and therefore essential to any conclusions to be drawn. Also, I will discuss some of the important structural, subjective, components which underlie the more extreme, defensive pieces of behaviour exhibited by many respondents and potential respondents. A major reason for adopting this approach is to argue for the necessity of including subjective data when attempting a sociological study of the individual in society.

In spite of the numerous undesirable features of everyday life in Southwest Detroit, most respondents tried to assure interviewers that they were not in need of assistance, and could cope quite adequately with their situation. Approximately 10% of those with whom interviews were attempted, but not obtained, displayed a high degree

of agitation, irritability, and suspicion, and frequently became quite abusive.

While poverty among the elderly was a major characteristic of their everyday life, it was not the only problem of significance, as I will point out shortly. However, in spite of an obvious lack of material resources most respondents did appear to have made an orderly, and fairly adequate adaptation to life under difficult conditions with respect to basic requirements. There were very few cases therefore which gave indications that absolute deprivation was being experienced and required outside assistance. There were however, a large number of instances where emotional distress was an obvious and significant problem.

All interviewers included comments in their written reports which expressed a deep concern at both the high level of emotional distress encountered and the rather obvious incongruency which existed between the observed conditions in which most of the elderly lived and the responses they gave to many items of the questionnaire. The high rates of refusal to be interviewed, refusal to answer door calls, doors slammed in the faces of interviewers, nil responses to questions asked (see previous tables) and the general lack of co-operation, all seriously affected the quantity and quality of data generated. Such data as

was obtained, especially with respect to the more personal questions regarding financial resources and ability to provide adequate self-care, seemed of questionable validity in many instances. Olmsted (1962:635-647) has raised some important questions regarding the problem of the validity and accuracy of the impressions of survey interviewers, also the methodological problems which can arise. One such difficulty in the Southwest Detroit survey was how to interpret and include the intuitive impressions received without detracting from the accuracy of the data. To discount these impressions because they were not objective in nature also seemed to be equally hazardous. Conventional sociology insists that objectivity must be maintained at a high level, yet as Stebbins (1967) has shown, this presents a paradox where research involves the highly interpersonal nature of the interview which frequently probes for intimate knowledge. Just how successful can an interviewer be in his attempt to "bracket" his own views and feelings and still penetrate to what Garfinkel called the "socially-sanctioned-facts-of-life-in-society-that-any-bona-fide-member-of-society-knows"? Holstrom (1964) has treated the interview as an information required for his pragmatically oriented exercise. The respondent, on the other hand, plays "an ingratiation game" whereby "he obtains rewards by presenting himself in

a favorable light and gaining the other persons approval". Such appeared to be the case with those respondents in Southwest Detroit with whom complete interviews were obtained. Even in the face of considerable financial inadequacy, most respondents sought to present themselves in a favorable light. The problems of interviewing, and the accuracy of information obtained are many, especially that of distinguishing between the objective and subjective aspects of information obtained. Some of these problems have been explored in depth by Schwartz (1956), Gergen and Back (1962), Riesman (1964), Manning (1967) and others. The problem of inference, an important focus on existential sociology, and proof, is developed by Becker (op.cit) and represents one of the major points of departure between conventional sociology and existential sociology. In this study, while the symptoms of emotional distress seemed apparent, the state could only be inferred, yet the affective state could not be ignored as having no influence on the interaction between the interviewer and respondent, and therefore the quality and quantity of information obtained.

A review of the mechanics of the interview process revealed what appeared to be an abnormally high rate of non-co-operation. Of a total of 1,242 contacts attempted, only 404 interviews were successfully completed,

representing a success rate of only 32.4%. Considering the low mobility rate of the elderly in Southwest Detroit due to a lack of both personal and public transportation, it seemed highly unlikely that the 177, or 14.3% who failed to answer the door were all out. Interviewers frequently expressed the opinion, an inference, that in many cases they suspected the occupants were actually at home. The noise of radio, television, and human movement, together with unusual movement of curtains, seemed to support their opinion. Of all contacts made, 229, or 18.4% refused to be interviewed and an additional 129, 9.9% accompanied their refusal with abusive or derogatory remarks, or slammed the door in the face of the interviewer. Another 13.2% refused to be interviewed because of a claimed inability to speak English. A claim viewed as false in many cases, by interviewers. Only 35 individuals, 2.8% claimed illness as a reason for declining to be interviewed.

Although there are many reasons why people may decline to be interviewed, such as lack of interest, and especially a feeling of emotional or informational inadequacy (c.f., Converse and Schuman, 1974), refusal accompanied by obvious signs of intense emotional distress must indicate a problem or problems which are very real to those exhibiting the distress but not easily identified. Stress and anxiety appeared to be the nature of distress

experienced by many of the elderly interviewed in Southwest Detroit. An immediate issue became apparent. How did one account for high levels of stress and anxiety, establish the relationship between these levels and poverty, and raise such intuitive, subjective, data to a point where they became capable of incorporation as significant variables into the study in hand. Problems such as stress, anxiety, anger, and frustration, while obviously related to objective factors, past, present, and future, are subjective in nature, underlie conduct, but are difficult to identify and measure in any empirical manner. The obvious "anxious-experiencing" of so many respondents, and potential respondents, I believed to be directly linked to the state of poverty and old age and were part and parcel of these two issues. Ali ibn Hazm (994-1064), an Arabian scholar, once wrote that, "No one is moved to act, or resolves to speak a single word, who does not hope by means of this action or word to release anxiety from the spirit". The quotation seemed apt in the face of our experience in Southwest Detroit. Existentialists have emphasized again and again that the affect of anxiety, a very real and universal human experience, is the price paid for individual freedom and the realization of its reality in everyday life. If this is indeed the case, then it may well provide the link sought in this study. Affective components are an

inextricable part of all human conduct which is itself the product of the peculiarly human attributes of freedom and choosing.

Stress

No individual lives without the experiencing of some degree of stress. It is part of everyday life. Stress, when applied in moderation it is motivating and invigorating for the whole organism. However, excessive and prolonged stress can have serious and damaging side-effects which result in disease, behavioural disturbances, and certainly unhappiness.

Essentially, stress is the physical, psychological, and emotional wear and tear due to our peculiarly human existence. And, as Redlich and Freedman (1966:125-152) have pointed out:

Stress is produced by an overload that the organism cannot handle; the equipment may be inadequate, the environmental input may be extreme, or both. In general, every organism has its breaking point. Organisms not only differ in "how" they will break but also in their innate, acquired, and learned attributes to forestall stress, cope with it, and the resilience to recover from it...An apparently small overload may produce stress and precipitate disordered behaviour.

With respect to the elderly in Southwest Detroit, stress must be a very real factor in their lives. Most of those interviewed had lived the greater part of their lives in the area. They had experienced the deterioration of the

neighborhood from one of middle-class comfortability and order to one of high crime rate, dilapidated housing, inadequate public services, socially isolated enclaves of racial and ethnic groups, and physical segmentation and isolation by main arteries and freeways. Old landmarks had vanished because of re-zoning and industrialization. Radical structural, demographic, ethnic, and economic change had applied tremendous pressures for re-adaptation and the restructuring of personal lives. Structural problems, the focus of conventional sociology, had given rise to personal existential problems of considerable magnitude, the focus of existential sociology. Social alienation, geographic isolation, and loss of a sense of personal worth and belonging must of necessity have had serious psychosocial implications for the elderly of Southwest Detroit.

The experience of conducting this study, and especially that of the highly emotionally charged face-to-face interaction of interviewing prompted the question: "What is it that we really have here, apart from material poverty?" One immediate answer seemed to be emotional poverty; but how does one empirically identify and measure it. You cannot; yet it seemed just as real in the lives of people as did their decaying dwellings, dirty streets, and high crime rate. The answer, emotional poverty, includes such subjective states as:

anomie	fear
confusion	hopelessness
uprootedness	alienation
anxiety	anger
apathy	frustration
loss of freedom	a sense of absurdity,

all of which the existentialists insist are experiential realities to be seriously reckoned with. All are subjective, psychic consequences of living in the state of poverty and perhaps in some way are tied to a repression of freedom.

Stress has numerous physiological, psychological, and emotional side-effects. It may impair motivation, reduce body strengths and drives, increase vulnerability to disease, precipitate emotional and behavioural disorders. This is especially the case with the elderly, and as Redlich and Freedman (ibid) warn, "There is danger of despair or disgust for the elderly in society, and rejection of life to which he clings," when excessive stress is experienced. Psychosocial factors operate for all aged persons, the impact of which will be largely determined by the adaptive ability, and the resources of the individual. The inability to cope with stress producing circumstances, such as poverty, and living in a deteriorating neighbourhood frequently results in antisocial conduct such as withdrawal from society, anger, agitation, the clinging to the past and familiar possessions,

and the type of highly defensive conduct experienced by those interviewing in this survey. All of these are very real indicators of the anxious experiencing of everyday life. For the aged, enquiry into the intimate aspects of the precarious nature of their lives brings with it a threat to the little remaining freedom they possess and generates a possibility of life in a public institution, or interference by outsiders. It was not surprising that so many of the elderly resented the interviewing process.

Anxiety: Response to the Threat of the Loss of Personal Freedom

Anxiety is an ubiquitous phenomenon of everyday life. The corporation president making decisions and choices; the line worker unable to maintain the pace of production; the elderly poor faced with the invoking of a city ordinance which will deprive him of his dilapidated home; each situation is liable to arouse the vague emotion of anxiety and the accompanying feelings of uncertainty and ambiguity, followed by such overt manifestations as irritability, hostility, and avoidance, which figure so frequently in human conduct and interaction. It is of the nature of human existence to respond both affectively and in conduct to those stimuli which are perceived as a threat to personal freedom, are unusual, ambiguous, unpredictable, and temporarily outside the purely rational limits of effective

manipulation and control. In short, any situation, the outcome of which is uncertain, and yet for which the individual will be held responsible, stimulates the affective states of anger, fear, anxiety, or any admixture of these three. Such situations are frequently accompanied by a sense of utter frustration and powerlessness which ultimately demands that something, anything, be done to alleviate the pain incurred. If, as is the case with the elderly poor, options are severely limited, that which is done may appear irrational, disorganized, or dysfunctional to the outside observer. However, consideration of the strict limits of resources and options available may reveal a high degree of rationality, and organization, in the adaptation made.

The affective experiences discussed above, and especially that of anxiety, represent for the existentialist a degree of tension or unrelatedness between the individual and a world which has lost part of its former meaning. It also represents a decreasing ability to wrest satisfactory meaning from a life which has become increasingly absurd in the face of resources and possibilities enjoyed by many others, but which are totally outside the realm of possibility for those such as the elderly poor. The elderly poor, subjected to reduced, and unalterable, economic circumstances, a personal, socially isolated, world in which

needed and wanted goods and services are no longer obtainable, face all the elements of alienation: powerlessness, cultural estrangement, self-estrangement, social isolation and meaninglessness. Marx in his description of the alienated, certainly seems to have included the elderly of Southwest Detroit when he wrote:

Alienation is apparent not only in the fact that my means of life belong to someone else, that my desires are the unattainable possession of someone else, but that everything is something different from itself, that my activity is something else, and finally (and this is also the case for the capitalist) that an inhuman power rules over everything.

The elderly poor, recognising the high value of their most treasured remaining possession, a degree of freedom and choice, can be expected to go to great lengths in refusing to disclose the true nature of their everyday life, and instead will present themselves in a favorable light, at least with respect to objective circumstances, wherever possible. Thus, it is not difficult to understand that one of the problems of their objective poverty will be the strong emotional undercurrents which represent the price to be paid for privacy, self respect, meaning, and freedom. For the conventional sociologist poverty is as described by Coser (1965:140-148):

...the poor are men who have been so defined by society and have evoked particular reactions from it... What is sociologically relevant is poverty as a socially recognized status. We are concerned with poverty as a property of social status...a status that is marked only

by negative attributes, that is, by what the status-holder does not have. This distinguishes him from any other status-holder in that it does not carry with it the expectation of a social contribution.

What is at issue here is the stress upon the dysfunctional nature of poverty with respect to an economy which demands that those who consume must also produce. It does not take into account that those in the state of poverty continue to negotiate life in spite of what must frequently seem insurmountable difficulties, nor does it explain what this means in terms of human meaning and how the absurdity of the situation, when measured against the affluence of other sectors of society, is handled.

In the interviews conducted with the elderly of Southwest Detroit, each interview was a face-to-face relationship in which many respondents indicated by word, action, gesture, or expression, that there was indeed a focus of problematic orientation, other than the purely physical characteristics of the life situation. However, examination of statistical data alone failed to reveal this focus. It was only by becoming an intuitive, sentient, reflective, participant in the existential moment of those being interviewed that this other dimension was capable of being identified and assessed as highly problematic. The real experience of the respondent was rooted not only in the answer given to empirically oriented questions, or the

physical environment, but in the expressive context which was also a part of the individuals whole world, past, present, and future. A consideration of the total experience of the respondents reveals that the whole world of these people was highly questionable, ambiguous, and unpredictable and therefore a source of anxiety; a problem of serious consequence for the health and well being of those experiencing it. Thus, in a most real sense, that in the face of which the elderly poor were anxious was a highly precarious existence. In many cases there would be no lived-for-or-toward life, only the existential moment of the "now" blocked on either side by the impenetrable walls of a past gone for ever and a rapidly diminishing future of maybe's. If the objective and subjective worlds of human existence are accepted as realities which affect human conduct and interaction it is difficult to see how a purely positivistic perspective, such as conventional sociology, can hope to capture all the data available and present an adequate explanation of the "how" and the "why" of the infinitely variable possibilities of human conduct. The use of a single perspective such as functionalism might be likened to the manufacturer who makes brassieres in only one size: not everyone fits.

APPENDIX A

MAP 1

SOUTH WEST DETROIT

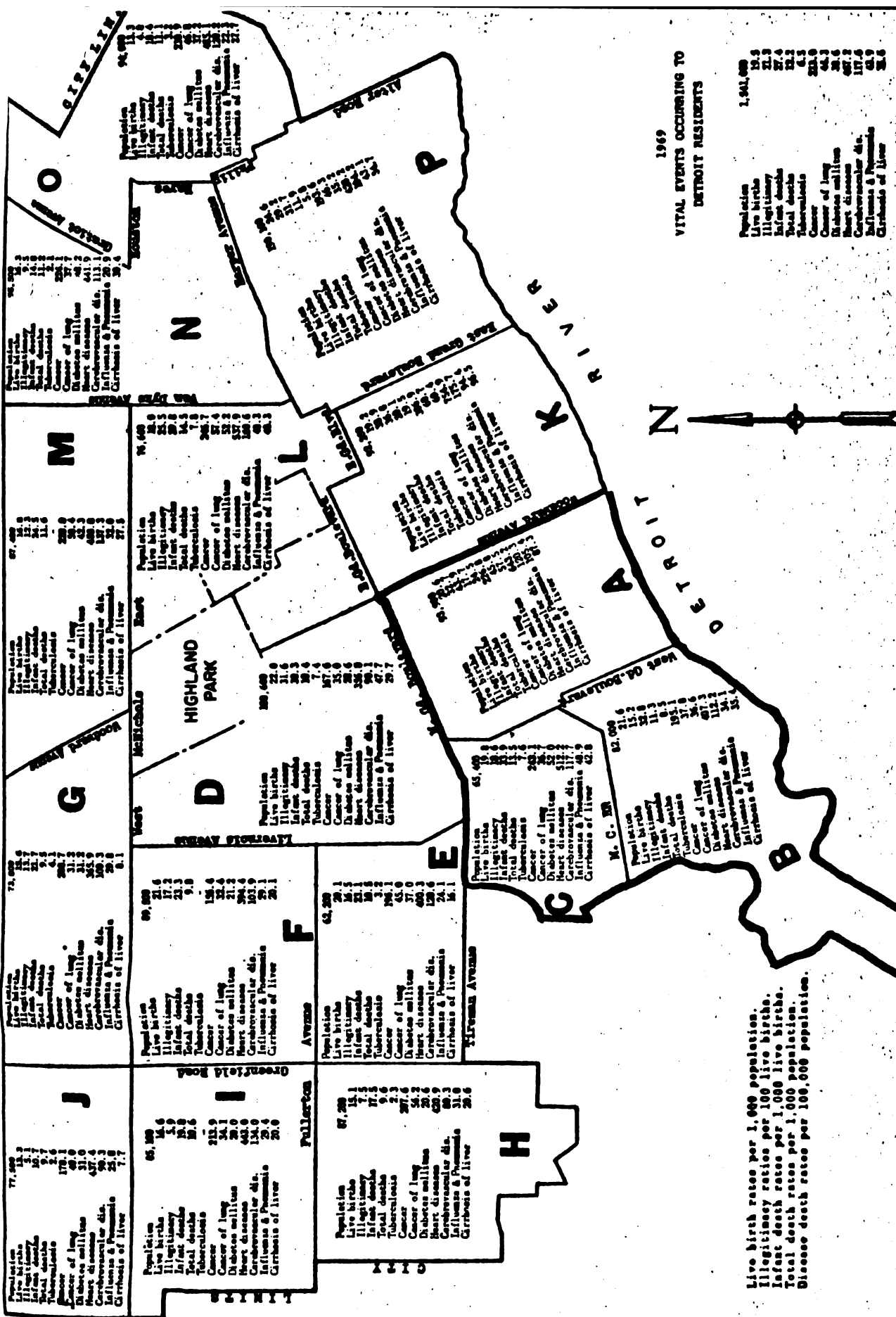


DETROIT DEPARTMENT OF HEALTH

VITAL EVENTS OCCURRING TO
DETROIT RESIDENTS

Population	1,941,000
Live births	14.5
Illegitimacy	21.3
Infant deaths	27.4
Total deaths	12.2
Tuberculosis	4.5
Cancer of lung	23.9
Diabetes mellitus	44.3
Heart diseases	38.4
Cerebrovascular dis.	497.2
Influenza & pneumonia	117.6
Cirrhosis of liver	13.9

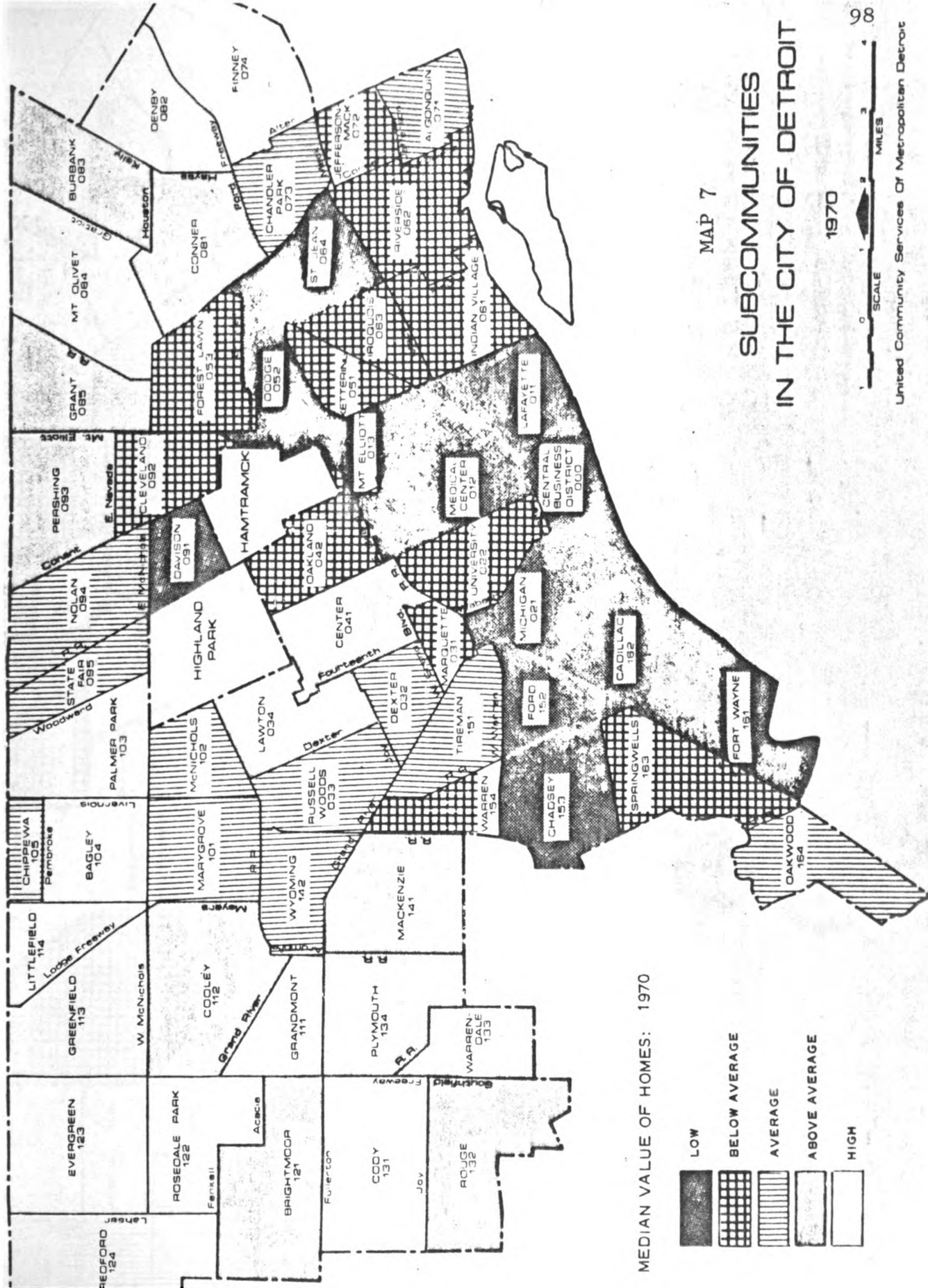
Live birth rates per 1,000 population.
Illegitimacy rates per 100 live births.
Infant death rates per 1,000 live births.
Total death rates per 1,000 population.
Disease death rates per 100,000 population.



HIGHEST CONCENTRATIONS OF PERSONS
65 YEARS AND OVER IN SOUTHWEST
DETROIT

MAP 6



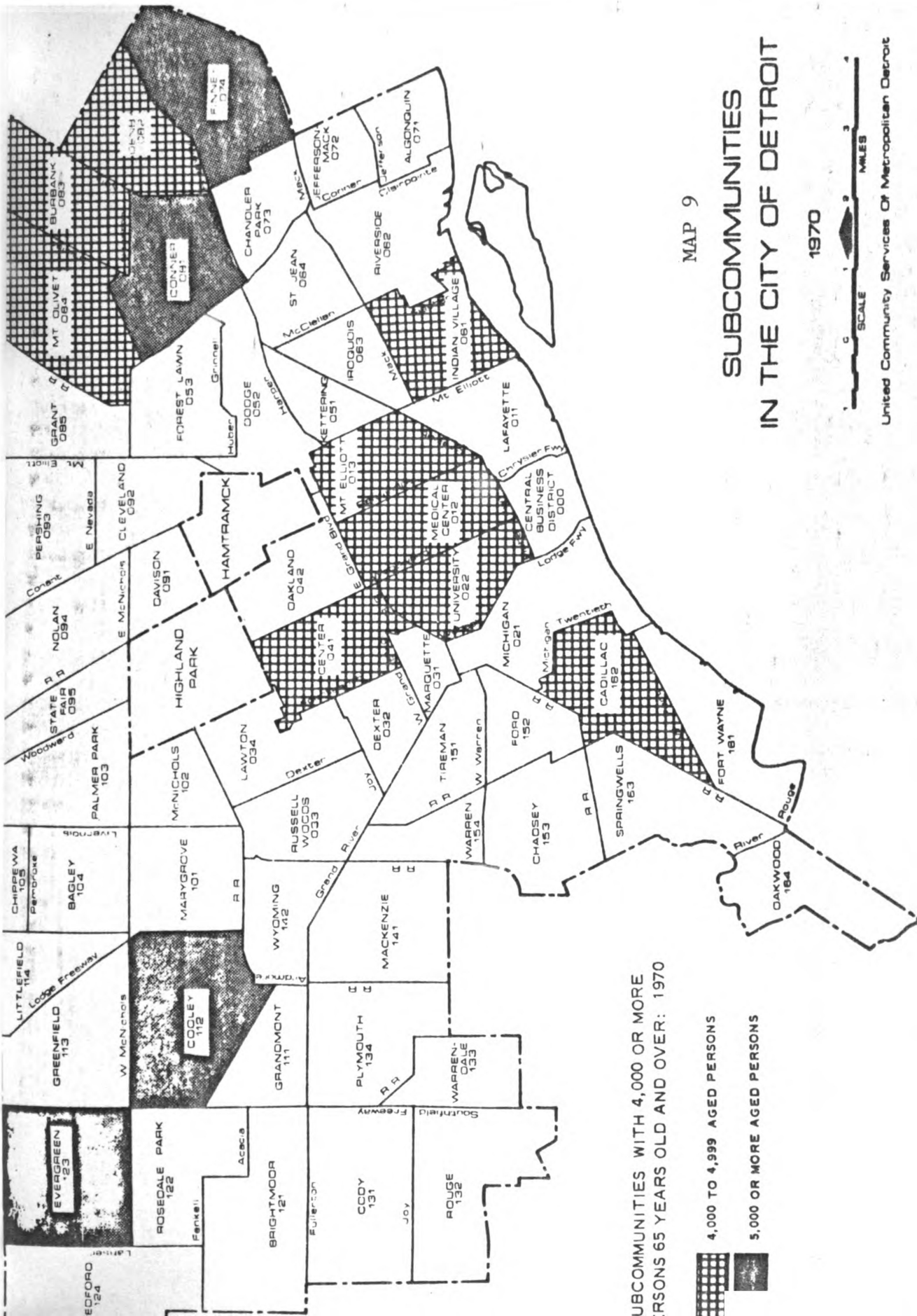


MAP 7

SUBCOMMUNITIES IN THE CITY OF DETROIT

1970





APPENDIX B

APPENDIX

QUESTIONNAIRE

Interviewer's name _____ Interview No. _____

Date of interview _____ Place of interview _____

1. Address _____
(number street apart.No.)

2. Type of residence _____

3. Race: (check one) white negro mexican other

4. Sex: male female

5. Age: _____ yrs.

6. How long have you been retired? _____

7. In what country were you born? _____

8. How long have you lived in Southwest Detroit? _____

9. Do you live in your own home? yes no

10. If no, do you have an apartment ____, a room ____,
boarding house ____, _____ other?

11. What activities for the retired do you take part in?

Name _____

Location _____

12. Which ones, if any, of these ailments do you have? (check)

poor sight feel tired all the time

 poor hearing diabetes

crippled hands _____ legs

☐ heart trouble ☐ chest trouble
☐ high blood pressure ☐ dizziness
☐ other

13. Do you find you can cope with everyday chores?

☐ yes ☐ no

14. What kind of things did you do in your leisure time before you retired? _____

15. What kind of things do you do now in your leisure time?

16. What stops you from doing more? _____

17. What special things would you really like to do?

18. Do you often get: ☐ bored ☐ lonely ☐ afraid

19. What kind of help do you need in the home? _____

20. How do you spend the day? _____

21. Do you attend church regularly? ☐ yes ☐ no

22. If not, would you like to? ☐ yes ☐ no

23. Which one? _____

24. Do you think that the church neglects the elderly?

☐ yes ☐ no

25. If you had the opportunity, what would you most like to happen to you today?

26. What would you like most for someone to do for you today?

27. Do you have many visitors? ☐yes ☐no

28. Would you like to have visitors? ☐yes ☐no

29. Would you like a minister or priest to call on you regularly? ☐yes ☐no

30. Do you find that you have enough money for:

food	<input type="checkbox"/> yes	<input type="checkbox"/> no
clothes	<input type="checkbox"/> yes	<input type="checkbox"/> no
medical	<input type="checkbox"/> yes	<input type="checkbox"/> no
rent	<input type="checkbox"/> yes	<input type="checkbox"/> no

31. What are the most urgent things that need to be done in the home?

32. Do you enjoy retirement?

DATA PROFILE OF ELDERLY INTERVIEWED

N = 404

Percent

White.....	91.1
Non-white.....	8.9
Male.....	41.8
Female.....	58.2
Mean Male Age.....	70.55
Mean Age Female.....	71.75
Mean age.....	71.2
Years Retired Male.....	8.9
Years lived in S.W. Detroit.....	41.8

Economic

Own Home.....	69.1
Apartment.....	12.62
Room.....	4.5
Live with Family.....	6.4
Rent House.....	5.7
Nursing Home.....	0.7
Hotel.....	1.0
Adequate Means for Food.....	86.0
" " " Clothes.....	83.0
" " " Medical.....	84.6
" " " Rent.....	91.7

Health

Adequate Means for Medical.....	84.6
Poor Health Inhibits Activities.....	36.4
Ailments: Poor Sight.....	41.0
Blood Pressure.....	23.4
Heart Condition.....	21.8
Arthritis.....	18.7
Hearing.....	16.1
Crippled Limbs.....	15.5
Tired.....	13.2
Diabetes.....	10.5
Chest Condition.....	9.5
Dizziness.....	5.9
Nerves.....	4.1

<u>Religion</u>	<u>Percent</u>
Attend Church Regularly.....	61.4
No, But Would Like to.....	30.0
No, Do Not Wish to.....	49.7
Church of Choice:	
Roman Catholic.....	49.1
Lutheran.....	14.2
Baptist.....	8.2
Presbyterian.....	3.1
Methodist.....	2.9
Other.....	14.9
United Church of Christ.....	5.6
Episcopalian.....	2.0
Would Like Clergy to Call.....	25.9
Would not Like Clergy to Call.....	59.1
Consider that Church Neglects the Elderly.....	12.7
<u>Social</u>	
Bored.....	34.7
Lonely.....	39.2
Afraid.....	31.5
Has Frequent Visitors.....	51.6
No Visitors But Would Like Some.....	36.7
No Visitors, Do Not Want Any.....	63.3
Time Since Last Vacation: Mean Years.....	5.0 yrs.
Never.....	14.3
Don't Know.....	6.7
Nil Response.....	7.6
Leisure Time Activities Before Retirement:	
Nothing or About the House...	59.7
Social/Outdoor Activities....	38.2
Crafts.....	9.6
Reading.....	3.6
Current Activities For the Retired:	
None.....	76.7
Church Related.....	15.0
Unions, Clubs, Lodges.....	4.6
Senior Citizens with Parks & Recreation.....	3.7

Personal Current Leisure Activities:

Nothing or About the House.....	43.3
Social/Outdoor Activities.....	20.3
Radio/Television.....	17.0
Crafts.....	14.3
Reading.....	15.5
Sitting/Resting.....	11.7
Gardening.....	9.4
Paid Odd Jobs.....	2.3

Activities Desired:

Nothing.....	51.9
Travel.....	17.0
Outings.....	12.8
Work.....	4.4
Needed Work on the House.....	3.4
Relax.....	2.1
Help Others.....	1.3
Crafts.....	2.1
Die.....	0.4

Practical Needs

Able to Cope.....	77.4
-------------------	------

Most Urgent Help Required:

Nothing.....	69.6
Repairs.....	14.2
Painting.....	13.3
Domestic.....	3.7
Grounds.....	2.5
Electrical.....	2.4
Furnishings.....	1.7

Help Required:

None Required.....	64.4
Already Have Help.....	13.7
Repairs.....	3.7
Domestic.....	12.3
Grounds.....	3.8
Laundry.....	0.4
Nursing.....	0.4

Would Most Like to Happen to You Today:

Nothing.....	19.5
Nil Response.....	9.3
Don't Know.....	6.1
Money.....	11.8
Peace.....	7.0
Work.....	1.3
Be Safe.....	2.9
Outings.....	4.2
Move.....	4.0
Better Health.....	24.6
Regain Youth.....	1.4
Travel.....	4.0
Die.....	3.1
Happiness.....	1.6

What Would You Most Like Someone To Do For You Today:

Nothing.....	50.2
Nil Response.....	12.4
Don't Know.....	6.0
Outings.....	1.6
Money.....	4.4
House Repairs or Painting.....	6.8
Domestic.....	9.8
Medical Services.....	0.9
Companionship.....	6.7

Can You Cope With Your Everyday Chores - Yes - 75.8

Would Most Like to Happen to You Today:

Nothing.....	19.5
Nil Response.....	9.3
Don't Know.....	6.1
Money.....	11.8
Peace.....	7.0
Work.....	1.3
Be Safe.....	2.9
Outings.....	4.2
Move.....	4.0
Better Health.....	24.6
Regain Youth.....	1.4
Travel.....	4.0
Die.....	3.1
Happiness.....	1.6

What Would You Most Like Someone To Do For You Today:

Nothing.....	50.2
Nil Response.....	12.4
Don't Know.....	6.0
Outings.....	1.6
Money.....	4.4
House Repairs or Painting.....	6.8
Domestic.....	9.8
Medical Services.....	0.9
Companionship.....	6.7

Can You Cope With Your Everyday Chores - Yes - 75.8

Would Most Like to Happen to You Today:

Nothing.....	19.5
Nil Response.....	9.3
Don't Know.....	6.1
Money.....	11.8
Peace.....	7.0
Work.....	1.3
Be Safe.....	2.9
Outings.....	4.2
Move.....	4.0
Better Health.....	24.6
Regain Youth.....	1.4
Travel.....	4.0
Die.....	3.1
Happiness.....	1.6

What Would You Most Like Someone To Do For You Today:

Nothing.....	50.2
Nil Response.....	12.4
Don't Know.....	6.0
Outings.....	1.6
Money.....	4.4
House Repairs or Painting.....	6.8
Domestic.....	9.8
Medical Services.....	0.9
Companionship.....	6.7

Can You Cope With Your Everyday Chores - Yes - 75.8

A PROFILE OF SOUTHWEST DETROIT COMMUNITY

By Population

Ford.....	21,898
Chadsey.....	30,303
Fort Wayne.....	11,313
Cadillac.....	33,553
Springwells.....	22,246
Total.....	119,313

By Race

Non-white Ford.....	12,723
" Chadsey.....	1,606
" Fort Wayne.....	3,507
Cadillac.....	2,248
Springwells.....	289
Total.....	20,373

By Age

Ford, 55-64 yrs.....	2,211
Chadsey " 	3,391
Fort Wayne" 	1,075
Cadillac " 	3,472
Springwells " 	2,281
Total.....	12,430
 Ford, 65 yrs. plus.....	 2,025
Chadsey " 	3,950
Fort Wayne " 	1,166
Cadillac " 	4,027
Springwells " 	2,732
Total.....	13,900

Median Age

Ford.....	25.1 yrs.
Chadsey.....	32.4
Fort Wayne.....	24.7
Cadillac.....	29.2
Springwells.....	29.9

Housing Units

Ford.....	7,107
Chadsey.....	10,636
Fort Wayne.....	3,834
Cadillac.....	11,385
Springwells.....	7,815

Owner Occupied

Ford.....	3,478
Chadsey.....	6,561
Fort Wayne.....	1,620
Cadillac.....	4,671
Springwells.....	4,271

Renter Occupied

Ford.....	2,953
Chadsey.....	3,607
Fort Wayne.....	1,783
Cadillac.....	6,082
Springwells.....	3,268

Median Value Owner Occupied

Ford.....	8,697
Chadsey.....	10,106
Fort Wayne.....	8,397
Cadillac.....	10,058
Springwells.....	11,225

Median Rent

Ford.....	68
Chadsey.....	75
Fort Wayne.....	65
Cadillac.....	75
Springwells.....	78

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