

Statement of Honorable John E. Fogarty, Congressman, Second Rhode Island District, on the Floor of the House of Representatives - July 27, 1956 - on his Bill, HR 10620, providing for expansion of teaching and research in the education of mentally retarded children, through grants to institutions of higher learning and to State Educational Agencies.

On April 18, 1956, I introduced HR 10620 which would implement and continue our assistance to the large number of mentally-retarded in this country who cannot presently realize their potential as useful adjusted citizens. When passed, it will represent a very vital act of recognition that mentally-retarded children in America have the same rights as other children to grow and develop to the fullest of their abilities. Only in the past ten years has this principle obtained general acceptance.

I had hoped that this bill would pass this session of Congress. However, after checking with Members of the Committee on Education and Labor and the Chairman, Mr. Barden, I am sorry to inform the Members of the House that no action will be taken this year. I have been assured by the Chairman of the Committee that hearings would be granted early next year and I am confident that the committee will report out this bill and pass it in the early days of the next session of Congress.

It was almost exactly two years ago that the House Subcommittee on Appropriations called your attention to the tragic nature of mental retardation and proposed that the Federal Government join the States and various organizations and individuals in an effort to prevent or mitigate this problem. Congress rapidly responded to this proposal and approved an increase of \$750,000 in appropriations for the National Institute of Neurological Diseases and Blindness and the National Institute of Mental Health which would be specifically devoted to initiation of a program of research leading to the eventual elimination of mental retardation. I might mention in passing that actual research undertaken by these Institutes in this area now considerably exceeds that original sum and the research attack on mental retardation has assumed major proportions.

It may be remembered that the Congress assumed this responsibility in the face of exceedingly tragic facts. There are now four and a half million retarded children and adults in the United States. Mental retardation is ten times more common than poliomyelitis or cerebral palsy, and this handicapped population is growing at a rate of 130,000 new additions yearly. Only a small percentage of these

children will obtain an education, be able to undertake more than unskilled labor for their support, or be capable of taking part in the normal activities of the average person. As our birth rate accelerates and as medical skills further reduce infant mortality, it is probable that the numbers of retarded born each year will increase further.

In making funds available two years ago for the research attack on mental retardation, the Congress was guided by a philosophy which has been basic to our support of research on all disorders during the past decade. We have realized that an attempt to render complete medical, educational, and rehabilitative services throughout our future to all the afflicted and disabled in this country on a permanent basis would involve sums far beyond our ability to bear them. Such services, however, are necessary and must be provided insofar as we are able, for they mitigate the problems of disease, though they do not eliminate them entirely. Through research, however, we are taking the most realistic steps toward the final prevention of premature death and disability.

Investment in research has, in fact, served us well. During the past decade we have seen the virtual control of the infectious diseases and the beginnings of control of some of the chronic disorders. Science, of course, can make no predictions concerning the ultimate conquest of mental retardation, but progress thus far has been heartening. Science has begun to understand some of the causes of infant brain damage, and prevention of mental retardation thereby has become an actuality in some instances. Thus, physicians no longer x-ray mothers in the first three months of gestation, and during the same period of the brain's most active development both physician and mother are particularly on guard against German measles. Science has also found that complete recirculation of blood in the newborn Rh incompatible child has been found to virtually eliminate kernicterus, a disease previously leading to cerebral palsy and mental retardation in ap-

proximately 1000 newborn infants every year.

The present research attack on mental retardation promises even greater gains. This research primarily focusses on determining a large number of unknown factors governing the fate of embryonic brain during pregnancy. Scientists are studying the entire history of human pregnancy in order to elucidate those environmental influences such as abnormal metabolism and nutrition in the mother which may lead to mental retardation in the child. Direct investigations of the developing embryo can be made on experimental animals, and a variety of techniques have already been developed to induce intellectual deficits in animals and to measure the extent of those deficits.

Promising as such research is, however, there is no question that the conquest of mental retardation, like the conquest of other disorders, will be achieved only after considerable effort. We should remember that the research attack on mental retardation has barely begun. Moreover, since it is likely that mental retardation is due to many causes, it is probable that progress to our ultimate goal will only come through slow, step-by-step progress.

This prospect, of course, does not hold out great hope to those who are mentally retarded now and to those who are responsible for their care. It is our evident responsibility, therefore, to do whatever is humanly possible to provide care, training, and rehabilitation to the mentally retarded at the present time. We know that mental retardation is not a hopeless condition and that, in fact, only a small number suffer such loss of intellectual capability as to be helpless. Out of every 100 exceptional individuals, only 5% show a severe loss in intellectual capacity; but the 20% moderately retarded and the 75% mildly retarded can and must receive those services which will grant them the maximum economic and social adjustment to society.

They must receive them, for otherwise large numbers of them will become public charges, and their lives wasted in institutions. And it is well to remember that each institutionalized retarded child costs society \$50,000 during his lifetime.

Traditionally, direct services to the disabled have been the responsibility of State and local communities and of those remarkable associations and individuals who dedicate themselves to humane works. During the past decade we have seen them assume these responsibilities more and more on behalf of the retarded child. Diagnostic and treatment clinics have sprung up throughout the United States; special nursery schools and special educational classes within city school systems have been established, and sheltered workshops and vocational rehabilitation programs have been organized. Many children who would otherwise have been helpless cripples are now capable of undertaking some of the activities of daily living and of achieving some degree of economic independence.

The fact remains, however, that while rapid advances have been made in the general and special education of retarded children, the need is still much greater than the achievement. Approximately 950,000 of the 1,000,000 retarded children of school age can profitably be educated, but less than 200,000 of them are either enrolled in special public school classes or in those special schools established to meet their particular educational needs. You will be interested to know that even this small total represents a 30% increase over the total school enrollment of mentally retarded just a decade ago.

What is the core of this problem? It has a number of facets, of course, but it is the profound shortage of specialized instructors which is of the most serious import. There are approximately 3000 teachers of the mentally retarded

in the United States today. While this represents a 40% increase over the number of teachers available ten years ago, we still need five times this number to meet the total need. In short, in a majority of this country's communities, the retarded child receives no education, no vocational training, and in some instances may not be able to take care of the most rudimentary needs of personal hygiene.

It is evident that we must meet this situation with all possible means. This present bill, H.R. 10620, would enable the Office of Education of the Department of Health, Education and Welfare to establish a program which would financially assist individuals to obtain the complex training necessary for the teaching of retarded children and which would assist State institutions to either expand or initiate their mental retardation teacher training programs.

Clearly, we cannot expect the total educational needs of retarded children to be met immediately. The need is great and the numbers of those who can undertake the teaching of the mentally retarded are relatively limited, for such teachers must have special enthusiasm and zeal, exceeding patience and gentleness, and exhaustive inventiveness - plus a willingness to accept remuneration that is not really commensurate with their education or their devotion. We are fortunate, however, that there are such selfless people, and that given the training opportunity they will devote themselves to a job which must have many disappointments as well as rewards. This bill will pave the way for making that opportunity possible and for at least partially realizing those goals stated in the Bill of Rights for the Handicapped Child, which was prepared more than fifteen years ago by the White House Conference on Child Health and Protection. This document states that the handicapped child has a right "to a life in which his handicap casts no shadow, but which is full, day by day, with those things which

make it worthwhile, with comradeship, love, work, play, laughter and tears - a life in which these things bring continually increasing growth, richness, release of energies, joy in achievement."

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