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Immigration Changes -- Mentally Retarded Congressman John E. Fogarty

Mr. Speaker, I would like to speak briefly in support of my proposal (HR 7976) to smend the Immigration and Nationality Act, and to offer a modification of the amendment.

Section 15 of the proposed amendment would provide for the deletion of the word "epilepsy" from the Immigration and Nationality Act, so as to permit unrestricted immigration of victims of this disease. This same Section 15 would also permit the admission into the United States of any alien afflicted with tuberculosis who is the spouse or unmarried son or daughter (or the minor, lawfully adopted child) of a U.S. citizen, an alien lawfully admitted for permanent residence, or of an alien who has been issued an immigrant visa, or has a son or daughter who is a U.S. citizen. Such admission would be contingent upon terms, conditions or controls established by the Attorney General at his discretion, after consultation with the Surgeon General of the Public Health Service. Finally, I would like to add a subsection (e) to this Section 15, to permit the immigration of the mentally retarded, under the same conditions as would be imposed upon the victims of tuberculosis.

Mr. Speaker, I believe that these changes should be made because the exclusion of these persons from our shores solely on the basis of their illnesses not only ignores the realities of the Nation's progress in health and rehabilitation, it strikes at the basic unit of society—the family. We do not discriminate against our own citizens who are afflicted with these diseases — we either cure them, or control their disease and rehabilitate them.

For nearly a quarter of a century I have been concerned directly with health and health-related research efforts on the part of the Federal government and indirectly; with the entire national effort, and I have seen this country establish a record of progress in medical research and rehabilitation in many diseases—a record of progress which these three diseases—epilepsy, tuberculosis, and mental retardation—may serve to illustrate.

The Immigration Act's restrictions against epileptics are unnecessary. Because of our research programs in this area, the treatment of epilepsy has advanced further during the past 25 years than during the preceding 25 centuries. We now have medicines that can enable 80 to 85 out of every 100 patients with epilepsy to lead a normal life. The Vocational Rehabilitation Administration, in fact, has recently reported that from 80 to 90 percent of the Nation's epileptics are capable of normal employment.

The stereotype of an epileptic as some one with gross brain damage, uncontrolled convulsions and psychological peculiarities is

as outdated as the idea that epileptics are below normal in intelligence. Yet some of the world's greatest men -- Caesar, Alexander the Great, Napoleon, Pitt -- were epileptics. We cannot afford to exclude all sufferers from this disease, at the risk of excluding men of this calibre. We can use men of talent and ability in all walks of life; we must not deny the potential in men because they suffer from epilepsy.

It is also unnecessary today to bar completely those individuals who are otherwise eligible for admission to this county solely on the basis of their having tuberculosis.

It is obvious that a good case could be made for excluding persons with tuberculosis from this country -- 60 years ago. But since 1900 the mortality rate from tuberculosis has decreased more than 97 percent, in this country. Medical research -- plus a rise in the standard of living -- were major factors in this decline. We have discovered new drugs, developed new surgical techniques, designed methods for the earlier detection of tuberculosis. And our extensive vocational rehabilitation programs have proved time and again that not only are more lives being saved, but that these lives are happy, normal, useful ones, serving to strengthen the fabric of our entire economy. Medical research and rehabilitation have made revision of the law mandatory. The selective admission of those with tuberculosis is, I believe, the only just and equitable and civilized course of action which, for this Mation would be an act of humanitarianism to be applauded by the rest of the world.

Finally, let us consider the Immigration Act's provisions restricting

those who are mentally retorded. Although as recent as 10 years ago
many doctors regarded them as hopeless and the public confused retordation
with mental illness, mental retordation has in the past few years become
the object of an unprecedented mationwide effort simed at its control and
cure.

We have enacted laws providing new programs for maternal and child ballth service, maternity care projects designed to prevent mental retardation, training of teachers of the mentally retarded, and for the construction of community mental health centers.

As important part of this invigorated effort is a strong citizens' movement which began nearly 15 years ago when the National Association for Retarded Children was formed, and which was attended by 40 parents. Today there are more than 50,000 members of this organization, and 1,000 local associations throughout the country.

But most significant, perhaps, is the fact that the President's Penal on Mental Retardation estimates that out of 5.4 million mentally retarded in this country, 5 million can become useful citizens and learn limited job skills. Another 300,000 or more can learn to take care of themselves in a shaltered environment.

Research continues to yield promising results. Doubt is being cast upon the accuracy with which the very term "mentally retarded" may be used. For example, in one 9-year study of 143 children judged to be retarded at the age of one year, 24 percent were found to be not retarded a few years later. These children could be helped — by correcting physical bandicaps, participating in special training programs, improving parental understanding, and by fostering association with normal children in their own homes.

Finally, let me point out that we have 90 State agencies operating under the State-Federal cooperative programs for vocational rehabilitation. Under these programs persons afflicted with epilepsy, tuberculosis or mental retardation are being vocationally rehabilitated. And, in addition to this, we have the rehabilitation programs of the local governments and of private agencies.

We are a nation which has not stood still in dealing with these and other disease problems. It is inconsistent for us to continue to carry on our law books provisions which our victories against disease have made obsolete. In so doing, we are denying ourselves the creative energies and talents of individuals — and their families — unfortunate enough to be afflicted with three diseases whose course can now be interrupted and controlled. In so doing, we are failing to recognize our great progress in the health fields, and we not only stand still — legally speaking — but look backward.

I believe that this House will join me in support of this effort to amend the Immigration and Nationality Act. And as we ponder these necessary changes, we might be reminded of the words of Emma Lazarus in her poem, "The New Colossus": Not like the brazen giant of Greek fame,
With conquering limbs astride from land to land;
Here at our sea-washed, sunset gates shall stand
A might, woman with a torch, whose flame
Is the imprisoned lightning, and her name
Mother of Exiles. From her beacon-hand
Glows world-wide welcome; her mild eyes command
The air-bridged harbor that twin cities frame.
"Keep ancient lands, your storied pomp!" cries she
With silent lips. "Give me your tired, your poor,
Your huddled masses yearning to breathe free,
The wretched refuse of your teeming shore.
Send these, the homeless, tempest-tost to me,
I lift my lamp beside the golden door:"

I believe that we have an opportunity to make even more significant the promise engraved upon the base of the Statue of Liberty -- let us let those who are "storm-tossed" on the seas of illness pass through the Golden Door.