SPEECH OF HONORABLE JOHN E. FOGARTY, M. C., 2ND DISTRICT, RHODE ISLAND AT THE SIXTEENTH ANNIVERSARY LUNCHEON OF THE WELFARE LEAGUE FOR RETARDED CHILDREN, INC., WALDORF ASTORIA HOTEL, NEW YORK CITY, N. Y., ON SATURDAY, NOVEMBER 19, 1955.

HENTAL REPARDATION

I am very happy to be able to talk with you today about

mentally retarded children. They constitute a problem in which I am

vitally interested and one with which I am directly concerned in my

capacity as Chairman of the Congressional Subconmittee which has

broad responsibility for setting the level of appropriations for the

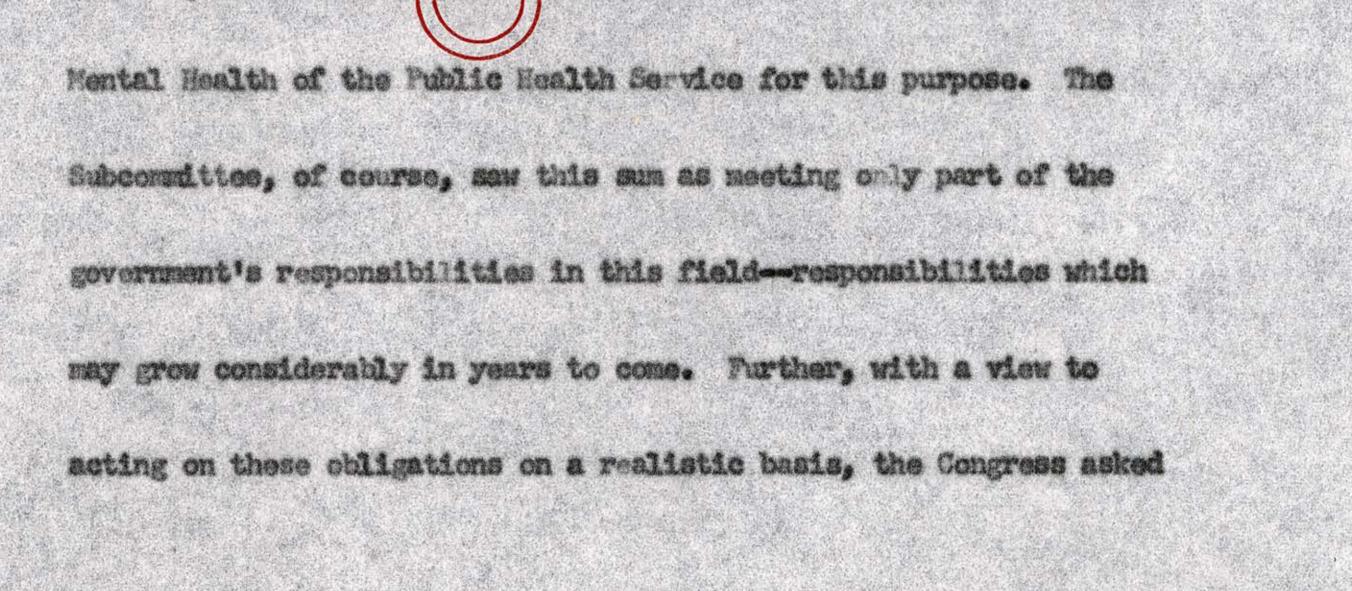
U. S. Department of Health, Education, and Welfare.

As some of you may know, this Schemmittee initiated a cam-

paign for a research attack on mental retardation this year; as a

result, the Congress allocated \$750,000 to the Mational Institute of

Neurological Diseases and Dispiness and to the National Institute of

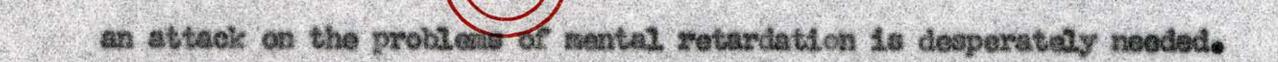


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the U.S. Office of Education to devote part of its increased appropriations to the development of plans for what can be and should be

a national program to aid the mentally retarded through specialized

These actions represent the beginning of a program at the Federal level. I am sure you who are concerned with this problem at the State and local level will welcome these actions, knowing that maximum progress can be assured only if there is a large-scale, cooperative effort involving both public and private resources. There is no question among many of us in Congress that such



We are familiar with some of the plain, hard facts: that mental re-

tardation is ton times more common than policy volities or corobral

palsy; that there are now by million mentally retarded children and

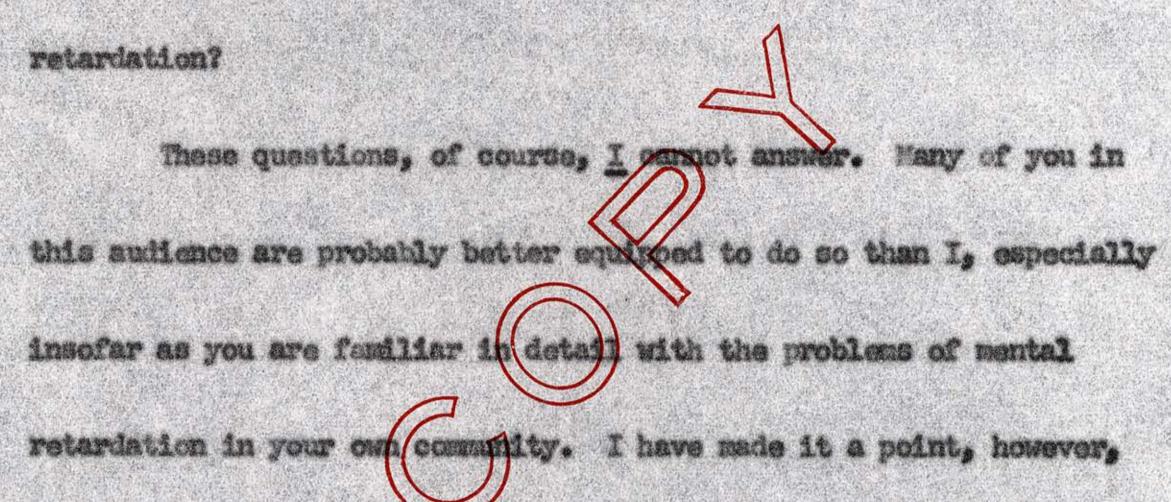
adults; and that this nation is adding to its handleapped popula-

tion at a rate of 130,000 children each year. As our birth rate

accelerates and medical skills further reduce infant mortality and increase the average life span, these numbers will grow even larger. Nhat can be done about this situation? What are the problems

the nation faces-problems which must be resolved if there is to be

a significant reduction in the many losses occasioned by mental





to study the problem carefully and to consult extensively with those

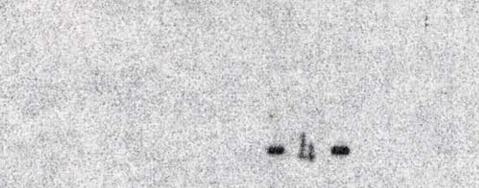
scientists and others in the Covernment whose competence and program

responsibilities relate in part to understanding the nature of mental

retardation, how the handicapped child may best become a useful mem-

ber of our society, and, finally, how mental retardation may be

prevented. In this sense, I have gained some understanding of the



problem on a national scale. It is this kind of perspective that I can share with you today. I hope you will be interested in how a Congressman views the problem, as I am in how you see it from your can point of view.

There are two broad problems, as I have come to see it: what

we can, or rather what we <u>must</u> do for the montally handicapped

child...and that we can do about proventing or treating mental

retardation.

For those children wid are now sontally retarded, the general

goals seen to me most profounily stated in the Bill of Rights for the

Fandicapped Child, prepared by the White House Conference on Child

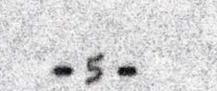
Health and Protection. It states that each handicapped child has a

right: "To grow up in a world which does not set him apart, which

looks at him, not with scorn or pity or ridicule-but which walcomes

him, exactly as it welcomes every child " It further states

that he has a right: "To a life in which his handleap casts no



shadow, but which is full day by day with those things which make it worthshile, with comradeship, love, work, play, laughter, and tearsa life in which these things bring continually increasing growth, richness, release of energies, joy in achievement." Must does this mean, specifically? It means the fulfillment

of many needs which exist in homes and communities throughout the

nation. It means meeting the needs for better exaction of the

parents of retarded children, and indeed of the entire public. It

means that a notion's of commutity diagnostic and treatment clinics

must be established throughout the country-clinics not only for

evaluating retarded children, but also for professional counselling

of their parents. It means that special mursery schools must be

built and staffed, and special education classes within the public

school system must be broadened, including the development of

vocational training programs. It is also apparent that more visiting

-6teachers and guidance workers are needed; more sheltered workshops; more community programs for the adolescent and adult retarded; and, especially, more trained persons to staff these programs, as well as to staff these institutions which care for the mentally retarded. Just how these wast needs will be met, I do not know. In

the States and the communities, competent professional workers,

dedicated volunteers, and even more devoted parents, have made

enormous efforts and notable progress on behalf of the mentally

retarded. There can be no quastion, however, that the need for

complete services for the mentally retarded far outweighs the ser-



whether all these services, in fact, can ever be obtained at

the enormous cost one can foresee for them is open to question.

That we must try, on both the State and local levels, is evident.

That the Federal Covernment must also lend support seems equally

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evident, though to what extent and in what specific areas remains to be defined.

As already indicated, however, the Covernment has adopted a significant role in support of research seeking ways to prevent mental retardation or to achieve its alleviation. I am speaking not only of the aforementioned 3750,000 specifically sermarked for this purpose in the budgets of the National Institute of Neurological Diseases and Elindness and the National Institute of Mental Health, but also of funds allocated by the Jongress in past years to both of

these Institutes in Bethesda, Maryland, for their extensive programs



of research, research training, and - to a lesser degree - community

services.

The Congress is proud of its support of such research. While

research on mental retardation has lagged behind research in other

areas, the results so far, I thinky amply justify our belief that

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the incidence of mental retardation can be substantially reduced, per-

haps ultimately to an extent comparable to the progress that has been made in the reduction of such diseases as diphtheria, typhoid fiver,

and smallpox.

Let me summarize a few facts that have come to my attention

during hearings before my committee, facts which document the kind of

progress that can be made. In the past second, Nr example, research

has uncovered the role of z-ray, Carney measles, and other various in-

fections during prognancy in daucing infant brain damage, and has led

to the adoption of suitable preventive measures among pregnant women.



medical management of endocrine imbalances in mother and child for

the prevention of mental retardation. And just last year, it was re-

ported that a method had been found for recirculating the blood of

newborn infants suffering from kernicterus, a disorder caused by Rh

incompatibility, a technique which may prevent the deaths of several

thousand newborn children annually and the crippling and mental re-

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tardation of another several thousand who without this advance would otherwise have lived in a handlespeed state.

A strong research effort on behalf of the mentally retarded, however, has just really begun. As it has been described to me by Government scientists and others, this effort falls into three major areas: a) Easic scientific studies of the brain and nervous system, with particular exphasis on studies of embryonic fowth of the brain and nervous system.



prognancy and birth which may be related to the

causation of mental retardation.

3) Clinical and basic studies devoted to finding better

methods for management of the montally retarded.

A great deal of basic scientific research on the brain has



already been done, and medical science is beginning to see its possible application to brain disorders. This past year, for example, a scientist at the National Institute of Neurological Diseases and Dimenses has discovered the basic chemical abnormalities in the brain responsible for epileptic seigures. This work, I am told, may proveprovide directly applicable to certain types of mental retardations but more important, perhaps, it has opened up new methods for investigating other metabolic brain charges which may be more specifically related to reduction of intellectual capabilities.

A number of studies are being made on animals. As I under-

stand it, scientists are duplicating in animals the circumstances

which might adversely affect human pregnancy, in an attempt to

create mental retardation in the animals. Mental retardation in

animals apparently can be created in a mmber of ways-for example,

by oxygen starvation-and investigators are trying to determine why

the brain responds abnormally to these stimuli. It has also been

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found, I am told, that the kinds of abnormal change a brain will under-

go may depend on the embryonic brain's stage of development. In terms

of being able to prevent mental retardation in the future, this might suggest particular and specific medical care and treatment at various

stages of pregnancy.

In my capacity as Chairman of the Subconstittee for Appropriations of the Department of Mealth, Education, and Welfare, I have asked the National Institutes of Scalth, including the two In-

stitutes most directly concerned with mental retardation, to report

to the Subcondittee not only on research progress but on those needs



est to us. This year the National Institute of Neurological Diseases

and Elindness told us of the initiation of a nationaide survey of

those factors occurring during prognancy, birth, and after birth which

might be responsible for mental retardation. Over a period of years,

large numbers of pediatricians, obstetricians, gynecologists, orthopedic specialists, and neurologists throughout the nation will record and assemble the most complete data possible on thousands of children from the moment of their conception to the time of diagnosis of mental retardation. When, in the future, enough data on enough children has been assembled, it is possible that science will be able to isolate those common items in the history of pregnancy, birth or after-birth which lead to various mental handicaps. The Government, largely through the Mational Institute of Nental Nealth, is also supporting research devoted particularly to

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finding out how the mentally retarded child may best be cared for

and how he can make the most profitable use of his limited intel-

lectual abilities. Many problems fall within this research offert:

Is it better to segregate the moderately and severely retarded from these with whom they cannot compete? Do they adjust better in their own houses and neighborhoods? Can psychiatric principles be applied to help the delinquent retarded make a better social adjustment? There is some evidence that psychiatric principles may be applicable and that, in fact, emotional maladjustment may be responsible for a relatively large number of cases of mental retardation. The National Institute of Mental Health has reforted that in a study supported by Institute funds, where 2000 tests were given over a 16-year period to California school objildren, over 60 percent of the children's I.Q.'s changed 15 or hore points, and about 10 per-

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cent changed 30 or nore points. Other investigations have proved



that the I. Q.'s of mildly retarded children may be increased appro-

ciably by psychiatrically oriented teaching techniques.

Several pilot research programs are devoted to determining

methods of increasing the adjustment of the mentally retarded. At

the University of Illinois, I understand, they are experimenting

with a regular nurvery program, plus individual psychiatric care, for

handleapped children between the ages of 3 and 6 with I.Q.'s ranging from LS to 60. At Vanderbilt University, they are testing the values

of group motivation as contrasted with individual incentive in the

mentally retarded's educational process.

In addition, neurophysiolgists and psychologists at the National Institute of Mental Mealth are designing diagnostic tests

which are expected to help physician distinguish between organic

and functional montal deficiency. There, using a battery of pay-

chological tests, are prostigating the ways in which intellectual

functions develops in mentally retarded as compared with normal chil-

dren. Differences in body growth patterns among the various types

of montal deficiency are also being determined, to find whether

such differences, if they exist have any significance in causation

of the disorder.

- 15 -These studies are typical of the kinds of research that can be done on mental retardation. But there seems to be no question that many promising areas must still be explored and indeed that some research areas have yet to be defined. I understand, in fact, that during the next three years the American Association for Mental Deficiency, with a grant of approximately slug 000 from the National Institute of Hental Health, will attempt to draw up general guidelines to stimulate further research and at the same time define needs for community service activities and skilled personnel. I should mention, too, that the fublic Health Service is supporting programs

for the training of specialized personnel who can be responsible for

the diagnosis and medical management of the mentally retarded, as

well as other mental and neurological disorders.

I have spoken in this vein concerning the Government's support

of research in mental retardation because that is your field of

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particular interest. The Congress, of course, is vitally concerned

with all the diseases which kill and cripple the people of this

country. You should know, moreover, that the Congress sees the total research programs of the nation as an interdependent and complemen-

tary effort; this is to say that while we encourage and stimulate

research in many areas other than mental retariation-for example,

in cancer, heart disease, arthritis, diabetes, excebral palsy, and

diseases of the eye and ear-we know Wat research on one disease

will cast light on another disease, apparently unrelated. Some of

the new drugs for the postsent of mental patients were developed by



This kind of evolution of medical progress is the rule, not the ex-

ception, and we may expect that many of the preventive measures for

mental retardation will emerge from a cientific endeavor directed to

other goals.

Since the end of World War II, the Covernment has assumed a

more significant role in the support of medical research, so that

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now more than 30 percent of such research throughout the United States is conducted under Federal auspices. Covernment-supported research has grown to such proportions because of the evident need

for an expanded research program to find answers to questions that arise as our population grous, and as it grows older. Our support, however, is considered only supplemental to the afforts of research institutions and universities throughout the country and the re-

search supported by industry and other private sources. The Congress is proud of the well belenced, coordinated national research attack

on disease that has been the pattern reflecting this philosphy.

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Let me close by saying that I am privileged to have been one

factor assisting in the growth of Government support of medical re-

search for more than a decade. Congress, responding to the wishes

and needs of the people, has done much to advance the health of the

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country in this time. I am proud of this fact, but I am also aware there is a great deal yet to be done. In decades hence, you who are particularly concerned with mental retardation, and the millions of children and adults who are the focus of your concern will share in the great advances which will result from predictable future progress in the medical sciences.

