

REMARKS OF HONORABLE JOHN E. FOGARTY, U. S. REPRESENTATIVE  
SECOND CONGRESSIONAL DISTRICT OF RHODE ISLAND AT ANNUAL  
BANQUET OF THE RHODE ISLAND OPTOMETRIC ASSOCIATION AT  
LINDSEY'S, LINCOLN, RHODE ISLAND, ON SATURDAY, JUNE 10,  
1961 AT 6:30 PM

---

*Journal  
Call  
Yesterday*

It is a great pleasure to be with you tonight  
and to have this opportunity to talk to you about  
eyes, aging, and our Nation's most important  
resource -- healthy population.

I have long been impressed with the important  
supportive role played by the optometrist in the  
early detection of diseases of the eye. Into your  
offices come people with all kinds of visual defects,  
and you thus are key personnel in advising the patient  
when disease requires further treatment. This is a  
tremendous responsibility you have. There are only  
about 20,000 optometrists in the United States, and it  
has been estimated that almost 40 percent of the  
population has eye defects.



I am aware of your Code of Ethics which binds you to advise the patient whenever other professional care seems advisable, and of the fine work you have done through the "Optometry Annual," which for years has stimulated interest in the early detection of glaucoma by competent refraction of the eye. The discipline of optometry has earned the gratitude of all of us for its use of preventive and corrective measures to insure maximum vision and comfort for a considerable part of our population.

Spectacles have been in use since the 14th Century, but the discipline of optometry is relatively new. Right here in New England, just 27 miles from Boston, Dr. Augustus Klein set up the Klein School of Optics, in 1896, where he delivered lectures in a pine grove on his estate. The following year the



American Optometric Association was founded. While Dr. Klein was not one of its founders, clearly it is the pioneering work of men such as he that established the roots that have become the discipline of optometry.

Still, I am impressed by the small numbers of optometrists we have who have such an important role in dealing with eye conditions in our population, especially in that nearly 10 percent of our population age 65 or older.

You may be asking yourselves at this point -- how do I qualify to speak to you on the subject of aging in the field of optometry, or aging in any field for that matter? My answer is simply that in the course of my 20 years in Congress I have become deeply interested in and active on the Health Subcommittee on Appropriations. As chairman of that subcommittee for nine years I have been



privileged to take a leading part in the establishment of a broad forward-looking program of research in the medical and biological sciences. To keep abreast of developments it was necessary for me to learn as much as possible about these fields to qualify as a well-informed layman, while at the same time serving as your representative, and, of course, as a citizen who has the same stake in medical progress as any other citizen.

Early this year the White House Conference on Aging was held in Washington. As some of you may be aware, I have a deep personal and official interest in the results of this, the first White House Conference on Aging. I am proud to have introduced H.R. 9822 calling on the President to hold such a conference. Officially, in my opinion, I performed no more important



task while chairman of the Appropriations Committee of the House of Representatives.

The importance of your profession's contribution to this Conference was recognized when Dr. Ralph Wick, Chairman of the Committee on Vision Care of the American Optometric Association was named to its National Advisory Committee.

In addition to Dr. Wick, two other representatives from the Association served as delegates as well as delegates from the American Optometric Foundation and the National Society for the Prevention of Blindness.

It was interesting to me to note in the Conference recommendations, the number of references to "optometry" and its significance in the total approach to meeting the challenge of aging.



I must share with you my deep concern about the results of the White House Conference. If you heard or read any of the many speeches I made preceding the Conference, and at the meeting itself, - you know what stress I placed on action. The Conference was not intended to be the goal - but a beginning along the lines that 2,565 voting delegates decided in workshops and general sessions.

During the recent hearings on the appropriations of the Department of Health, Education and Welfare, I was very critical of the report of the conference because it was not the "blueprint for action" that had been promised. I ventured to add that this might well be the most expensive and least productive of the national conferences and could be a cruel hoax against



our senior citizens who prayerfully waited patiently for positive action after the hundreds of gatherings that were held in preparation for the Washington meeting.

More than ever, I believe that favorable action should be taken on the bill I introduced in Congress on the opening day of the White House Conference. It calls for the creation of a Federal Commission on Aging that will provide the mechanism, prestige and independence needed to keep the national program on aging vital and meaningful and not a "left-over function" or "second-best" activity of any one department.

I have just heard of the formation of the Vision Institute of America and some of the plans for pilot projects in the field of aging. This is a most important development in the field of aging and its potential for



the field of optometry is equally significant. We shall all be watching and encouraging you in this endeavor. It is almost the prophesy on the cover of "Vision of the Aging Patient" come true. It says "Old age can well be the golden years of a human life. The optometric profession can help to make it that by the proper care of the most vital of the senses - vision."

It is my hope that Rhode Island will take a leadership role in this entire field of meeting the needs of the aging on all fronts. There are several unique factors affecting our State which are the basis for my expressing this objective.

At the present time, our older persons covered by medical insurance far exceed the national average.



Rhode Island welfare and medical programs are somewhat more liberal than in many other states. Only eight percent of our population receives Old Age Assistance Benefits, ranking 41st among the other states.

A state analysis shows 27 percent of the aged in Rhode Island to be handicapped by serious defects in vision, hearing or mobility.

It is most encouraging to have Brown University included among the distinguished universities undertaking a part of the national research program.

At Brown, initially, the socio-economic factors associated with aging will be studied and the relationship between these factors and the medical and biological aspects of aging and old age will be assessed. Five of



the Departments of the University will contribute to the project and the Rhode Island Hospital and community facilities will be used for clinical research purposes.

Other aging studies at Brown University are being supported by the Atomic Energy Commission, the Public Health Service and the Ford Foundation.

Arrangements are under way to hold the second of the nine regional conferences - sponsored by the U. S. Office of Education with seven other educational groups at the University of Rhode Island in August. Again our state will play host to leaders from all of the New England States to develop the place of education in meeting the needs and desires of our elderly for life-long learning and meaningful retirement.



It is my hope that the University of Rhode Island may become one of the nations centers on aging and preliminary steps have been taken toward that goal.

This is my concept of action. It has meaning for each of us in the job we are performing in our chosen fields and as citizens of the state and nation.

To you, as optometrists numbering approximately 20,000 nationally and 150 within Rhode Island, there is a tremendous opportunity.

A few figures tell us of the task before you. Approximately 70 million Americans have eye ailments and need glasses; about 1 million persons have glaucoma without knowing they have it; 350,000 persons are considered legally blind, half of these are individuals 65 years of age or older.



It costs the United States approximately \$500 million annually for the special benefits for the blind. There is no way to measure the cost to the individual, his family, friends or the community.

Of this I am sure, that with the devotion to your profession that has been reflected in your growth and achievements, there is a brighter tomorrow for our nation and for our senior adults who have had cause to doubt the value of their added years.

Now, they can look forward to useful, healthful years lived with dignity and independence.

Much of this will be realized because you have kept faith with your own "Optometry's Pledge."

"Next to life, itself, God's most gracious gift is sight, and to the service of this great gift



of sight, we optometrists sincerely and  
faithfully dedicate our ministry."