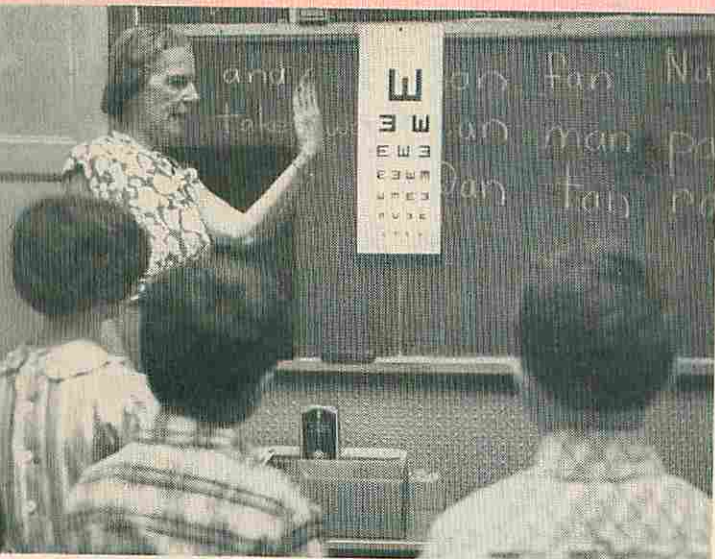


don't let *hidden handicaps* retard



First-grade pupils in a New York City public school are tested for possible sight defects. Children who do not yet know the alphabet tell the examiner the direction in which the prongs of the letter E appear to go. This is only one of the periodic checks of sight which are a regular part of a good public health program in schools

your child



PHOTOGRAPHS BY MORRIS ENCEL



In the same New York City program, regular ear examinations check on the possibility of any impairment of hearing

In every town in the country this year school children will be branded as stupid—merely because of undetected defects of sight or hearing. Don't let this happen to your child. Make it your business to see that he is regularly tested

by Robert Robinson

Somewhere along your street, perhaps in the house next door, maybe in your own home, lives a young victim of a hidden handicap. This child and others like him seem to be square pegs in round holes. We adults might say they're "different" or "strange" or "misfits." Their playmates are more brutally frank. They call them "dopes" or "crybabies" or "spoilsports."

Yet these boys and girls are guilty only of not seeing or hearing well. The tragedy is that their handicaps have not been discovered. Because they are not obviously blind or deaf, the real cause of their maladjustments remains hidden. As the years pass, their whole lives may be poisoned. It is easy for them to become frustrated, to rebel against parents. Some even end up in reformatories and prisons.

A child in my neighborhood is one fairly average case. To protect his identity, we'll call him Harry R. His father had been a professional baseball player. Mr. R. spent hours teaching his son to play the game. Harry was well developed for his age and had the natural grace of an athlete. He should have been a good ballplayer but he could neither hit nor catch the ball effectively. At first he tried to cover up his failure by playing with greater enthusiasm. But since he didn't understand why he struck out when at bat, why younger boys were becoming better players than he, why he was invariably the last man picked when sides were chosen, [Continued on page 125]

be leaving for Philadelphia the next afternoon.

My father didn't go to work the next day at all. We had breakfast in the dining room, and then we went back up to the rooms, except that my father stopped in the lobby and had a short whispered conversation with one of the bellboys and gave him something I didn't see. Aunt Ruth didn't come down to breakfast, but she came upstairs later to help us pack.

When we had everything packed my father said, "Well, we still have an hour to kill. Let's do a little fishing. What do you say, fellows?"

"Oh boy," my brother said, and Aunt Ruth started to say something but stopped when my father got out a big

ball of string and some real fishhooks and started tying the hooks to pieces of string. It wasn't string like we'd had before but real fishing line with gut leaders and everything.

We all crowded close together by the window, my brother and I and my father and Aunt Ruth, and we no sooner had hung our lines out the window than they began to jerk, and we all caught bags of peanut brittle.

"Oh boy," my brother said and took his bag of peanut brittle off the hook and got out a piece and closed his eyes and opened his mouth. I noticed that my father and Aunt Ruth were looking at each other over their bags of peanut brittle in a funny way, and they were

both getting kind of pink at the same time, and they didn't look like they wanted to fish any more. I jabbed my brother with my elbow, and he closed his mouth and opened his eyes and his lip stuck out and he began to get red in the face.

"It's all right," I said hurriedly. "We don't have to throw it away this time, but let's eat it later. Right now, let's keep on fishing. Maybe we can catch some more."

So my brother and I threw our lines out the window again and turned our backs on the room, and I never did know for sure whether my father kissed Aunt Ruth just then or not. But I think maybe he must have, because we all live together now. —DON STANFORD

Don't Let Hidden Handicaps Retard Your Child

Continued from page 43

Harry turned into a bully. Every error he made became an excuse for a fight.

His unpopularity at school, his misery in his father's presence were clearly evident. Twice in a single summer he ran away. By the time he reached the sixth grade, he was three years behind his age group in school. Harry was eventually picked up by juvenile authorities for stealing in a downtown department store. Then his trouble came to light. When he had a complete physical examination, it was evident mild astigmatism blurred his vision.

"We have his vision corrected now," the juvenile investigator told me. "I just hope it isn't too late for Harry to readjust himself."

During my investigation, I found that one out of three children can have hidden handicaps like Harry's. According to the U. S. Public Health Service, in every classroom of forty children, eight of them have some vision impairment. Besides, there are six youngsters who hear imperfectly. Unless their defects are discovered in time, total blindness or deafness awaits many of them.

This idea may shock and frighten you. Yet most vision and hearing defects can be corrected, just as your dentist discovers and corrects tooth decay. By learning the symptoms to watch for, by insisting on periodic checks, by co-operating with school and health supervisors in a medical follow-up when deficiencies are spotted, parents can help lick hidden handicaps.

Parents must do the job because children seldom realize they aren't seeing and hearing normally. Also, many children feel embarrassed because of their visual or hearing impairments and resist examination. A

ten-year-old Ohio girl avoided a school hearing check twice by feigning illness when her class was tested. She wept as though she'd been told she had leprosy when her hearing loss was diagnosed. "Grandma was deaf," she said. "Nobody likes a deaf person!"

You may have questions like the ones many parents asked me: "Don't the schools give tests? Won't they tell us if our children have bad eyes and ears?"

According to the U. S. Office of Education's Dr. Elise Martens, only twenty-three states specifically require that school children's eyes and ears be checked regularly. Even where the requirement has been written into law, I found this was no sure safeguard for children.

"We've got a dandy law," one teacher told me. "Don't misunderstand," she said. "I approve of checks on vision and hearing. Every youngster should have them. But I think someone should give them who is trained and equipped to do the job."

As she talked, I got a clear picture of how often our good intentions come to nothing. After the state's lawmakers declared every school child's eyes and ears were to be examined, the state superintendent of education sent a letter to local school boards telling them to comply with the law. No funds for the examinations were provided. In this teacher's district, there was no full-time physician or nurse in charge of the school health program. The county health officer ducked the job, saying, "I'm already overworked and understaffed." In the end, each teacher was told to check her own students.

My teacher-friend said, "I didn't know what to do, so I got a book from the library. It described some tests, but

they all required special equipment we didn't have. So I gave the children an old-fashioned whisper-test."

A number of states do have a sound system for checking the health of school children. But even in these states the final responsibility for correcting the hidden handicaps rests with the parents. And over and over I heard the same story from school officials: "Without the parents' co-operation in correcting the deficiencies once we find them, we might as well not give examinations in the first place."

In Wisconsin, for instance, a city school system gave every pupil an audiometer test. The audiometer is an electrical machine that produces certain tones of controlled intensity and frequency. By means of this machine, the exact limits of an individual's hearing range can be determined. When the test results were in, several hundred parents were informed by letter that their children had hearing deficiencies. They were urged to consult ear specialists.

When months passed and many parents had failed to act, the state medical journal attempted to find out why. Two parents out of three answered: "It isn't necessary to correct a hearing loss!"

Doctors told me that some parents completely reject the diagnosis of their children's defective vision in this way.

Maladjustments in the children arising from such stupidity on the part of parents can hardly be overemphasized. A check among children with poor vision in Cleveland showed sixty-five out of every hundred had failed one or more times in schoolwork. In one state school for delinquent boys, seventy-one of three-hundred and seven—almost one in four—had hearing losses which had contributed to their difficulties with the law.

Naturally the negligence of a few parents does not give the whole picture. A Texas school physician told me:



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"The great majority of young parents are anxious to know how they can prevent or remove their children's physical disabilities." In my own interviews, this opinion was borne out.

For your convenience in checking your own children's hearing or sight—in case there seems to be trouble in either one—here are two lists of symptoms compiled from the reports of the U. S. Public Health Service, the American Hearing Society and the National Society for the Prevention of Blindness. These symptoms are danger signals. Familiarize yourself with these signs. You may be able to detect impaired vision and hearing in your own children before serious physical handicaps develop, seeking medical advice in good time.

CHECK LIST FOR VISION

If after observation you find that several of these symptoms have been marked "Yes," the child should be examined by an eye specialist.

1. Does he rub his eyes often?
2. Does he often blink or try to brush away the "blur?"
3. Does he often stumble or trip over objects when walking or playing?
4. Does he hold books too close when reading?
5. Does he tilt his head forward when looking at objects?
6. Does he hold his head to one side when reading and studying or often change the distance of the book?
7. Does he frown when reading or attempting to see objects at a distance?
8. Does he lack persistence while reading, quickly grow inattentive or show signs of fatigue?
9. Does he close one eye or squint when watching the movie screen or doing close work?
10. Does he grow irritable or display fits of temper while doing close work for long periods?
11. In reading or spelling does he con-

- fuse o's and a's, o's and c's, n's and m's?
12. Do his eyes water while reading or while viewing the television screen?
13. Are his eyes often red, encrusted, swollen or do they give off a discharge?
14. Does he have repeated sties?
15. Does he complain of headaches?
16. Does he often become dizzy or sick while riding in an automobile, train or on a bicycle?
17. Do his eyes often vibrate or tremble?
18. Is the pupil of one eye definitely larger than the pupil of the other?
19. Does he complain of dizziness or nausea or seem unusually tired after movies or watching the television?
20. Does he complain of, or show symptoms of, pain in and around the eyes?

CHECK LIST FOR HEARING

If, after observing the child at play, in conversation or while listening to the radio, you find that several of these symptoms have been marked "Yes," the child should be examined by an ear specialist.

1. Does he frequently ask that words or phrases be repeated?
2. Does he hear when his back is turned to the speaker?
3. Does he hold his head to one side or habitually turn one ear toward the speaker?
4. Does he seem not to hear conversation as easily as his friends do?
5. Does he appear to strain in order to hear a speaker or to keep up with what is being said?
6. Does he fail to hear a water faucet dripping when in the same room?
7. Does he often breathe through his mouth?
8. Does his voice sound peculiar and lack expression?
9. Is he unable to locate the direction of sound?
10. Is he listless, sensitive or suspicious with his playmates?
11. Does he habitually speak in a louder voice than his companions?

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A TODAY'S WOMAN INVESTIGATION

By William A. Lydgate

The pros and cons of that vital problem—whether to rent or own the home you live in

A Fact-Feature Coming In February

12. Does he tend to remain aloof from the group?
13. Does he gesture more than other children to make his wants known?
14. Does he have faulty articulation and mispronounce common words?
15. Do his friends joke about his lack of attention or about his hearing?
16. Does he give poor attention and make frequent mistakes in carrying out directions?
17. Does he have earaches or complain of noises in his head?
18. Has he suffered repeated colds and sore throats?
19. Following an infected or "running ear" or contagious diseases, such as measles, whooping-cough, scarlet fever, chicken pox, mumps and influenza, has the child failed to receive a hearing examination?
20. Does he show signs of extreme fatigue, such as irritability, restlessness or shrinking from responsibility during or after listening to the radio or to conversation?

Trained medical specialists are achieving near-miraculous results in restoring sight and hearing losses

when they get to the patients early! Eighty-five per cent of one group of hard-of-hearing children showed improvement after their parents sought medical treatment for them. With modern scientific care, ninety-five per cent of children's visual defects can be corrected.

To help you maintain the necessary vigilance, more and more school systems are undertaking to examine all pupils' eyes and ears regularly. The National Society for the Prevention of Blindness, 1790 Broadway, New York, New York, will supply equipment and directions for giving visual checkups to school children.

The American Hearing Society located at 817 Fourteenth Street, N. W., Washington, D. C., will help your local school to locate a skilled audiometrist to administer hearing checks.

These medical developments and proper vigilance on the part of parents foreshadow a day when our children will be spared the heartbreaking frustrations that plague the victims of these hidden handicaps.

—ROBERT ROBINSON

Being a Mother Yourself You'll Understand

Continued from page 29

his most treasured possession), and with its meager contents, bought myself two bottles of beer which I drank, one right after the other. Then I went to bed, and never in my whole life have I felt happier or more at peace with the world than I did that night. Nobody but a mother could understand. And even mothers are pretty shocked by my performance in the park last Friday. Other mothers may have wanted at times to throw their offspring into the fountain, but at least they never did. Yet, perhaps if I tell you everything that happened last Friday, you'll understand.

It was Jack's mother. My mother-in-law. Jack and I have been married eight years now, but I never met her before last Friday. It's just one of those things. We began our married life in California, and her home always has been here in the South. We tried to get together several times, but something always came up at the last minute to interfere—like my being pregnant, mostly.

So last Friday was a pretty important day for me. It was even more important than you'd think—because the old girl is loaded. Yes, really in the chips. But she's always been very generous with her money. She gave a house to each of her other two sons. And to

us, she's given some really exquisite sun suits. And some super toys. And some really wonderful purses and gloves for me.

But there's no point in denying that I did think a house would be very nice for us too, now that we've moved to Sandlee. It looks as if Jack's going to be here permanently, so it seemed to me that day that whether or not we got the house would be pretty much up to me and the kids. I mean, if we made a good impression, yes. If we made a bad impression, no. It all depended on us because Jack was held up in Chicago, and we four had to come on ahead without him.

When I woke up on Friday morning, I didn't feel in the least calm, cheerful and controlled. But I put on a very good act. "Hi-ya kids, isn't this a wonderful day?" I greeted them gaily. "This is the day you're going to meet your grandmother for the first time. She's coming to have lunch with us."

"Aw heck," said Peter, the seven-year-old, "why does she have to come today? I want to go over to Billy's house after school and play cowboys."

I told him cheerfully that he could do that another day and that I knew he was just going to love Grandma. And then I dashed into the kitchen to throw together a breakfast. I got the egg off Peter's face, saw that the cot-

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