

MARYLAND SOCIETY FOR SIGHT, INC. (AKA MARYLAND SOCIETY FOR THE PREVENTION OF BLINDNESS)

GENERAL

A. MISSION

The Maryland Society for the Prevention of Blindness was incorporated in 1910. The purpose was to promote all possible means to prevent blindness and the preservation of sight in the State of Maryland; to educate the general public about eye health and to cooperate with other organizations to reach these goals. In keeping with our mission, the organization was re-christened The Maryland Society for Sight.

After screening and educating over 30,000 Marylanders in the course of our 109 year history, we closed our doors in early 2020. We find that there are many more opportunities to be screened (schools, medical offices, etc.) for vision issues than when we began. The Society takes some credit for changing preventative healthcare in Maryland to value eye health and promote vision screenings.

We have donated our remaining funds to the Maryland School for the Blind and their community outreach programs to assist families in finding specialized vision care for their child.

B. HISTORY

In 1909, the Society was organized and its first meeting was held at the home of Mrs. Joseph Colt Bloodgood, founder and first secretary, with Dr. William Henry Welch presiding. At this meeting, the Honorable Charles J. Bonaparte was elected president of the Society.

Then, as now, all activities were carried on in full cooperation with the medical profession and with official public health and educational agencies. The Society acted largely as a promoter, disseminating instructive material addressed to parents, nurses, teachers, and industry, as well as the general public.

World War I brought increasing demands upon the community, and so, from 1914 to 1926, the Society became inactive. During these years, supporters continued to preach preventive measures, and in 1926, the Society was reorganized and opened an office with its first full time executive secretary.

Dr. B. Franklin Royer, Medical Director of the National Society for the Prevention of Blindness, made a survey of the City and State, the results of which showed a definite need for the work of the Maryland Society. Up to this time, emphasis had been placed upon prevention of ophthalmia neonatorum, infection of the eyes of newborn babies, but in view of the findings of the survey, it was apparent that the Society's services should be expanded to attack every cause of vision loss.

The work was financed by interested private individuals until January, 1929, when the Society became affiliated with the Community Fund of Baltimore (now the United Way of Central Maryland).

In the spring of 1927, an appeal letter sent out by the Society released figures on eye injuries from industrial accidents. This letter was the touchstone for a safety drive in industry. Thus, safety education became an essential part of the Society's program. It was not until 1948, however, that intensive work in industry was undertaken with a project funded by the Community Chest.

In 1936, The Baltimore County Health Department requested help in vision testing of school children. This grew to be a major activity for the Society. Volunteers were found and trained in screening techniques. The screening program eventually was expanded to include preschoolers, the elderly, the handicapped, and members of the general population as well as the school children.

The activities of the Society continued to grow and adapt to the needs of the public it served. Demands for lectures and printed matter came from a variety of sources including schools, hospitals, and social agencies. Exhibits were displayed and films were shown before large groups. Advice was given to many seeking help in the solution of their eye problems. Intensive programs for eye health education were conducted utilizing various media outlets.

The Society was supported by the United Way of Central Maryland, contributions, memorial gifts, bequests, and legacies.

## B. LEGISLATION

The Society has taken an active part in securing the passage of substantially every state law and Baltimore City ordinance aimed at conserving sight and preventing blindness.

### Midwife Law

One of the early interests of the Society was in helping to secure in 1910, the enactment by the Maryland legislature of the "Midwife Law" which provided for the licensing of midwives or persons practicing as midwives, who had educational qualifications. One of the purposes of this legislation was to be sure that the eyes of newborn babies were treated with silver nitrate as soon as they were born in order to prevent what was popularly called babies' "sore eyes". The medical name for the disease is "ophthalmia neonatorum", and the Society helped bring about the passage in 1914, of a Baltimore City ordinance making the disease a reportable one.

### Air Rifles and B-B Guns

Legislation forbidding the use of air rifles and B-B guns within Baltimore City was promoted by the Society. In 1935, this act became statewide and was broadened to include regulation of all deadly firearms sold to minors, including sling shots and darts.

### Safety Glass Law

The Society prepared and, with the active support of representatives of the Baltimore Safety Council and the Maryland branch of the American Automobile Association, succeeded in having passed in 1935, a law requiring the use of safety glass in automobiles. However, the law passed with a loophole permitting the use of old fashioned plate glass in public busses, including school busses. To cure this situation, the Society prepared, sponsored, and steered through the Legislature an amendment adopted in 1937, which required safety glass in public busses.

### Fireworks Legislation { A COPY OF THIS BILL IS IN THE LOW VISION CLINIC }

The Society introduced legislation in 1936, 1937, and again in 1939, which was defeated all times. Exhaustive studies were conducted, and in 1941, with organized support of state and local authorities, various organizations, and the press, the fireworks law was passed. Maryland could prohibit the sale and use by individuals of fireworks. Currently, only sparklers are legal for individuals to possess except in Baltimore City, Prince Georges and Montgomery Counties, where they are illegal. In addition, since 1954, a federal law prohibits their shipment from "open" states into those where use is not allowed; this act also having been urged by the Society,

## C. GENERAL/SPECIAL HEALTH EDUCATION

### 1. PURPOSE

Because half of all blindness is preventable, the Society strives to reach people in time -before irreversible vision loss occurs, before blindness strikes. Early detection of vision problems can be critical to their successful management. As long as people suffer unnecessary sight loss, there is a need for health education.

### 2. PROGRAMS OFFERED

The Society's health education efforts are incorporated into every program offered, using speakers, films, exhibits, counseling, media spots, and mailings. These include:

- Educational and training programs for Urban Services, Head Start, day care personnel, and parent volunteers to alert them to the symptoms of possible eye problems and to train them to screen for eye problems in preschoolers.
- Eye Health education programs conducted at senior citizen centers
- Educational exhibits at health fairs, professional conferences, shopping malls, schools; industry, and hospitals
- Films on eye safety and eye diseases sent to schools, business, and industry
- Various mailings included eye safety posters to parks and recreation facilities, a quarterly eye safety newsletter "Wise Owl News", and

- responses to requests for assorted information and literature
- Counseling about special eye problems and/or referral to other sources

#### D. SCREENING AND CASE FINDING

The number of identifications of individuals in need of eye care made as a result of the Society's screening and case finding program confirms the importance of screening as a tool to prevent unnecessary visual loss or blindness. Aside from detecting possible problems through vision screening, it is also an opportunity for educating both professionals and the public about the need for regular eye examination.

##### TARGET POPULATIONS

Three target populations who have a higher than average incidence of ocular pathology or in whom early detection is crucial are screened under this program. They are:

- Preschoolers -if discovered early, lazy eye blindness is almost 100% preventable. To identify this and other problems that can occur early in life, thousands of preschool age children are screened.
- Senior citizens -approximately every two years, as membership changes, vision screening is offered at senior citizen centers. This is especially significant because as age increases, vision problems such as cataract and glaucoma become more prevalent.
- Handicapped -screening physically handicapped individuals requires different techniques and more time. Very often this group is not screened because of these difficulties, yet they are a group with frequently occurring eye problems.
- Special screenings set up in cooperation with the Health Departments or Mayor's Office
- Glaucoma Alert Day held in cooperation with the Maryland Society of Eye Physicians and Surgeons
- B' More Health Expo
- Neighborhood health fairs

#### E. COMMUNITY OUT-PATIENT CARE

The Society has always been responsive to the needs of the community and, consequently, has adapted to changes that enhance reaching its goals and objectives.

##### HEALTHCARE FOR THE HOMELESS

The Society donated ophthalmic eye care equipment for examinations to Healthcare for the Homeless where the clinics are staffed by residents from the local hospitals.

##### MOBILE UNIT

In February 1982, the Society purchased a mobile medical eye examination unit. This purchase was made possible through a donation from the Campbell Foundation.

The purpose of the unit was:

- To provide service to "special" groups for whom it is difficult to obtain traditional care
- To identify those in need of on-going care and motivate them to seek proper care
- To inform them as to the resources available, including rehabilitation services

The unit was used to perform complete examinations on those who are medically indigent and do not have the means or the motivation to seek care for eye problems. or for whom the traditional screening procedures are not available. This includes the disadvantaged, the handicapped and the elderly.

Prescreened individuals who require further evaluation were examined by ophthalmologists aboard the mobile unit. Those in need of further medical care are identified and receive individualized assistance in obtaining the treatment they need.

#### OTHER USES

Several work sites have requested a program involving the mobile unit as a place for screening and as an educational experience.

#### F. VOLUNTEERS

Through the utilization of volunteers, the Society is able to promote its programs and educational efforts beyond what the staff can do alone. Because the Society has a small staff, volunteers assist with much of the screening. They are trained by the Society, and under supervision, do vision screening in all programs.

##### Baltimore City

In Baltimore City, volunteers are used to assist a staff member in screening the Urban Services and Head Start Day Care Centers. These volunteers work only at those centers and are not available for other assignments.

##### Baltimore and Carroll Counties

In Baltimore and Carroll Counties, trained and experienced volunteers often do vision screening on their own with a staff member available for counseling and assistance in rechecking any individual whose vision is not 20/20.

##### Other Areas

In the remaining areas, volunteers work in the same capacity, but on a smaller scale.

##### Volunteer Ophthalmologists

Volunteer ophthalmologists are used to speak to senior citizen groups, to industrial safety engineers, and to do evaluations on the mobile unit.