Table I shows the population under consideration and the distribution of vision problems in numbers and percent for the most prevalent vision problems. In this table, the vision problems are defined as significant deviations from normal, as agreed to by a broad sample of optometric and ophthalmological opinion. It is obvious that some children would have a constellation of problems; for example, a child might have reduced acuity in the left eye, amblyopia, hyperopia, astigmatism, anisometropia, and squint. He would then appear in several rows in the table and each of his vision problems would contribute to the "Total Conditions" but he would be counted only once in the "Total Children."

Number columns in thousands

TABLE I.—CLINICALLY SIGNIFICANT VISION PROBLEMS OF CHILDREN BY AGE GROUP
[Number columns in thousands]

Age group	0-4		5–9		10-14		15–19		Total	
	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per- cent	Num- ber	Per-
Population, 1965Vision problems:	21, 242	100	20, 420	100	18, 888	100	16, 977	100	77, 527	100
Visual acuity Amblyopia Refractive error:	850 425	4 2	1, 225 408	6 2	1, 700 378	9	3, 059 340	18 2	6, 834 1, 551	9
Myopia Hyperopia Astigmatism Anisometropia Coordination problems:	212 1, 487 425 425	1 7 2 2	1, 225 613 613	3 6 3 3	2, 267 1, 133 567 756	12 6 3 4	2, 886 1, 019 509 849	17 6 3 5	5, 978 4, 864 2, 114 2, 643	8 6 3 3
Squint Esophoria Exophoria Hyperphoria Organic problems:	850 212 425	4 1 2	817 408 613	4 2 3 (1)	756 378 567	4 2 3	679 340 509	4 2 3 (1)	3, 102 1, 338 2, 114	4 2 3
Congential Traumatic Disease Performance problems:	212 <u>2</u> 12	(1) 1 1	204 204	(1) 1 1	189 189	(1) 1 1	170 170	() 1 () 1	775 775	(¹) (¹) 1
Vision performance_ Vision develop- ment	1, 062	5	2, 859	14	3, 966	21	4, 244	25	12, 131	16
Vision perception otal conditions otal children	? 6, 797 2, 549	?	2, 042 817 12, 661 4, 084	10 4 <u>2</u> 0	2, 267 944 16, 057 4, 722	12 5 25	1, 358 679 16, 811 5, 263	8 4 31	5, 667 2, 440 52, 326 16, 618	7 3 <u>2</u> 1

¹ Less than 0.5 percent.

The existing level of care and its adequacy have a major influence in determining the unmet need. *Table II* presents information on the percent of children in each age group who have had previous professional care (examination, glasses, surgery, etc.) by either an optometrist or ophthalmologist. Effectivity of care is indicated as the percent of those children with vision problems, receiving care, who passed established levels of performance. Two communities of differing socioeconomic levels are compared.

TABLE II.—PREVIOUS VISION CARE BY OPTOMETRISTS OR OPHTHALMOLOGISTS, EFFECTIVITY OF CARE, AND EFFECT OF SOCIOECONOMIC FACTORS

	Įir	percent]		
			Age group	
		0-4	5–9 10–14	15-19
Vision problems High income community previous care_ Effectivity Time since last visit (months)		12 3	20 25 9 24	31