

# EDITORIAL

## WHEN THE TEACHER BECOMES THE STUDENT

The 3<sup>rd</sup> International Congress of Behavioral Optometry that took place in Virginia this past May brought together a significant number of people from all over the world who share a basically common concept of the visual process. I have attended two of these International meetings, and perceive a distinct difference from the first to the third. The Monaco meeting, while held in Europe and co-sponsored by the Optometric Extension Program Foundation (OEP) and the European Society of Optometrists (SOE), nevertheless had the flavor of being a primarily American event. That is, although we Americans were not the geographical host, there was the impression that we were something more than honored guests; that we held the wisdom of Behavioral Optometry and were willingly sharing it with a most receptive audience. My impression at the Virginia meeting was that this was beginning to change.

While the majority of presenters and exhibitors were citizens of the US at the Virginia meeting, the non-American attendees were more vibrant and confident than I remember them being in Monaco. This became evident in private conversations and in interchanges during and after the lectures and workshops. Further, I believe that several of the European exhibitors have developed protocols and equipment that bring a logic and utility to vision therapy that is unique and will serve to enhance its implementation. Members of the third sponsor of the

meeting, the Australasian College of Behavioral Optometrists (ACBO), gave evidence of the great progress Behavioral Optometry has made and continues to make in the Pacific Rim. And attendees from South of the Border demonstrated a growing awareness of the need for them to provide the services of Behavioral Optometry to the citizens of our closest neighbors.

There can be no doubt that Behavioral Optometry is an American phenomenon, started by A. M. Skeffington, and continued by an ever widening group of his colleagues and students. It has endured in spite of a number of obstacles inherent in the philosophy of American medicine and in our recently devised and evolving, yet imperfect health care system that is based in managed care. But perhaps the most significant indicator of its strength is the level it has reached internationally. While an American phenomenon, its universal appeal and subsequent growth attest to power of Behavioral Optometry to improve the lives of peoples of all nations.

This spread of Behavioral Optometry across the world has primarily been the product of individual Americans teaching the tenets of this discipline on foreign shores. A second force has been the willingness of others to leave their countries for short or prolonged periods of time in order to observe the practice of American Behavioral Optometry in private offices, or to attend courses at several of the schools and colleges of op-

tomety. In all of these instances, we have been the teachers. On the basis of the Virginia meeting, I suggest that the time is not too distant when the teachers will increasingly become the students. This will be among the greatest accomplishments of American Behavioral Optometry.



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