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(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

I'M DELIGHTED TO RETURN TO THIS PODIUM ONCE AGAIN. THIS TIME I'M GOING TO TALK -- NOT ABOUT SMOKING -- BUT ABOUT ANOTHER QUITE SERIOUS PUBLIC HEALTH MATTER. LIKE SMOKING, THE THREAT OF AIDS ALSO TURNS ON THE PERSONAL BEHAVIORS OF MILLIONS OF AMERICANS...BUT, <u>UN</u>LIKE SMOKING, AIDS IS STILL A MYSTERY.

WITH YOUR INDULGENCE, LET ME TOUCH LIGHTLY ON THE RECENT HISTORY OF THE DISEASE AND THEN I WANT TO EXPLORE SOME OF THE KEY QUESTIONS IT POSES TO SOCIETY...TODAY. I'LL DO THAT IN THE COURSE OF TELLING YOU A LITTLE BIT ABOUT MY REPORT ON AIDS.

FIRST...A LITTLE HISTORY.

ALMOST SIX YEARS AGO, IN JUNE 1981, THE PUBLIC HEALTH SERVICE OFFICE IN ATLANTA, WHICH COLLECTS INFORMATION FROM STATE HEALTH AGENCIES, BEGAN TO GET SOME RATHER ALARMING REPORTS. IT WAS INFORMED OF 5 CASES OF PNEUMOCYSTIS CARINIII PNEUMONIA IN LOS ANGELES.

FIVE CASES IS NOT MUCH...BUT THIS LETHAL DISEASE IS SO RARE THAT A HANDFUL OF CASES IN A SINGLE YEAR IS LIKE AN EPIDEMIC. SOON THE REPORTS TRICKLED IN OF OTHER SUCH CASES OCCURRING IN OTHER CITIES AS WELL.

OUR PEOPLE INVESTIGATED AND THE TRAIL LED TO MANY PEOPLE WHO, FOR SOME MYSTERIOUS REASON, WERE SICK AND THEIR BODIES WERE NOT FIGHTING BACK AS YOU'D EXPECT THEM TO.

AS A RESULT, THEY WERE NOT ONLY SICK WITH THIS VERY DANGEROUS FORM OF INFECTIOUS PNEUMONIA...THEY WERE DYING FROM IT...AND NO ONE KNEW WHY.

IT APPEARED THAT OTHERWISE HEALTHY, NORMAL PEOPLE WERE ACQUIRING SOME KIND OF "BUG" -- A VIRUS, MOST LIKELY -- THAT ATTACKED AND APPARENTLY DESTROYED THE NAT'RAL IMMUNE SYSTEMS OF THESE VICTIMS.

THE ODD THING WAS THAT THE VIRUS ITSELF WAS NOT KILLING PEOPLE;
PEOPLE WERE DYING OF EXTREMELY VIRULENT DISEASES BECAUSE THIS VIRUS -WHATEVER IT WAS -- PREVENTED THE BODY FROM FIGHTING THEM OFF.

WE'D NEVER COME UPON A SYNDROME Q"ITE LIKE IT BEFORE, AND SO WE GAVE IT A SOMEWHAT AWKWARD TITLE. WE CALLED IT THE "ACQUIRED IMMUNE DEFICIENCY SYNDROME," BUT WE SOON SETTLED JUST FOR THE INITIALS... A.I.D.S....OR "AIDS."

AND IT'S BEEN AIDS EVER SINCE.

YOU'VE READ THE STORIES AND SEEN IT ON TELEVISION, I'M SURE, SO I WON'T GO THROUGH THE ENTIRE 6-YEAR HISTORY ALL OVER AGAIN. INSTEAD, I'LL JUST TOUCH ON A FEW KEY POINTS:

FIRST OF ALL, WE'RE TALKING ABOUT A DISEASE THAT IS SPREADING. THE NUMBER OF VICTIMS IS DOUBLING IN LITTLE MORE THAN A YEAR. FOR EXAMPLE, AS OF JANUARY 1986, WE HAD A CUMULATIVE TOTAL OF 16,000 REPORTED CASES.

TODAY THAT TOTAL IS 30,000. BY THE WAY, OVER HALF OF THEM HAVE ALREADY DIED OF THE DISEASE...AND THE REST WILL.

LAST YEAR WE HAD OVER 13,000 NEW CASES ADDED TO THE TOTAL. THIS YEAR WE EXPECT ANOTHER 23,000 NEW CASES.

BY THE END OF 1990 THE CUMULATIVE TOTAL WILL BE CLOSE TO 270,000.

MAKE NO MISTAKE ABOUT IT. AIDS IS SPREADING AMONG MORE PEOPLE...
AND IT IS FATAL.

AFTER LOOKING AT ALL THE INFORMATION WE NOW HAVE, MY BOSS, DR. OTIS R. BOWEN, THE SECRETARY OF HEALTH AND HUMAN SERVICES, LIKENED THE SPREADING AIDS SITUATION TO THE ARRIVAL AND SPREAD OF SMALLPOX AND THE BUBONIC PLAGUE IN EUROPE SEVERAL CENTURIES AGO.

SECOND POINT: EVEN THOUGH SCIENTISTS HAVE HAD A LOOK AT THE AIDS VIRUS, WE DON'T REALLY KNOW WHAT IT IS. AND UNLESS WE KNOW THAT, WE HAVE NO WAY OF STOPPING IT. YES, WE'RE MAKING PROGRESS IN THE RESEARCH EFFORT, BUT IT'S VERY SLOW GOING.

IN 1984 THE SEARCH WAS NARROWED DOWN TO SOMETHING CALLED A HUMAN RETROVIRUS AND OUR SCIENTISTS AT THE NATIONAL CANCER INSTITUTE WERE EVEN ABLE TO PIN-POINT A SPECIFIC ONE. THEY CALLED IT THE "HUMAN T-CELL LYMPHOTROPIC VIRUS TYPE III," OR SIMPLY "HTLV-III."

APPARENTLY THE SAME VIRUS SHOWED UP IN THE WORK OF THE PASTEUR INSTITUTE, WHERE IT BECAME KNOWN AS THE "LYMPHADENOPATHY-ASSOCIATED VIRUS," OR "LAV." SCIENTISTS NOW AGREE TO CALL IT BY THE SINGLE COMMON NAME OF "HUMAN IMMUNODEFICIENCY VIRUS," OR "H.I.V."

THIS WAS A VERY IMPORTANT STEP. BECAUSE WE KNEW WHERE THE VIRUS WAS, WE WERE THEN ABLE TO RECOGNIZE THE PRESENCE OF ANTIBODIES SPECIFIC TO THE AIDS VIRUS IN AN INDIVIDUAL'S BLOOD SERUM. OF COURSE, THOSE ANTIBODIES AREN'T VERY EFFECTIVE, BUT THEY'RE PRESENT NEVERTHELESS.

AS OF 1985 WE'VE HAD A TEST THAT CAN DETECT THE PRESENCE OF THESE ANTIBODIES IN A PERSON'S BLOODSTREAM. ON THE BASIS OF SUCH TESTING SO FAR, PLUS OTHER EPIDEMIOLOGICAL STUDIES, WE BELIEVE THERE ARE BETWEEN A MILLION AND A MILLION-AND-A-HALF AMERICANS WITH THE AIDS VIRUS IN THEIR SYSTEMS.

THEY HAVE AIDS...BUT THEY AREN'T YET SICK WITH AN AIDS-RELATED DISEASE, SUCH AS PNEUMOCYSTIS CARINII PNEUMONIA OR KAPOSI'S SARCOMA OR ONE OF THE VIRULENT MEGALOVIRAL DISEASES.

ONE MAJOR COMPLICATION IS THE LENGTH OF THE INCUBATION PERIOD. IT APPARENTLY CAN BE ANYWHERE FROM A YEAR OR SO IN SOME PEOPLE TO 10 YEARS IN OTHERS, IF OUR COMPUTATIONS ARE CORRECT. SO WE STILL CAN'T PREDICT DEFINITELY WHICH H.I.V. CARRIER WILL OR WILL NOT GET AN AIDSRELATED DISEASE.

BUT THE RISK IS VERY, VERY HIGH. IN FACT, SOME RESEARCHERS NOW FEEL THAT <u>ANYONE</u> WITH THE AIDS VIRUS WILL EVENTUALLY CONTRACT AN AIDS-RELATED DISEASE.

AND THE MORTALITY RATE FOR PEOPLE WITH AIDS-RELATED DISEASES APPEARS TO BE 100 PERCENT.

THERE'S OTHER RESEARCH GOING ON AS WELL. I'M SURE YOU'VE READ ABOUT THIS OR THAT DRUG BEING TESTED ON AIDS PATIENTS. THE MEDIA, FOR EXAMPLE, HAVE GIVEN MUCH COVERAGE TO ONE DRUG, AZIDOTHYMIDINE, OR A.Z.T., THAT SEEMS TO PROLONG THE LIVES OF SOME AIDS VICTIMS DYING OF PNEUMOCYSTIS CARINII PNEUMONIA.

BUT I'M AFRAID THAT'S ALL A.Z.T. DOES...IT <u>PROLONGS</u> SOME LIVES, IT DOES NOT SAVE THEM.

PEOPLE ASK ME, "DR. KOOP, WHEN CAN WE EXPECT AN EFFECTIVE VACCINE TO BE AVAILABLE?" AND I HAVE TO TELL THEM THAT I DON'T SEE ONE IN THE FORESEEABLE FUTURE.. IT TOOK 19 YEARS TO DEVELOP THE HEPATITIS B VACCINE AND THAT WAS A COMPARATIVELY EASY VIRUS TO UNDERSTAND.

VACCINE DEVELOPMENT IS ALSO A VERY DIFFICULT SCIENTIFIC
ACHIEVEMENT. IF NOT PRODUCED WITH GREAT CARE, A VACCINE CAN CAUSE AS
MUCH ILLNESS AND DEATH AS THE DISEASE IT'S SUPPOSED TO ATTACK.

BY THE WAY, SOME OF OUR SCIENTISTS PREDICT THAT WE'LL BE ABLE TO TAKE THE VERY FIRST STEP IN VACCINE DEVELOPMENT LATER THIS YEAR.

TESTS WILL BE MADE TO DETERMINE THE SAFETY THRESHHOLD FOR A KIND OF VACCINE WHICH DOES NOT ITSELF SEEM VERY PROMISING BUT WHICH MAY, ON THE OTHER HAND, LEAD US TO THE ULIMTATE SAFE AND EFFECTIVE VACCINE WE'RE ALL LOOKING FOR.

NOW, FOR MY THIRD POINT:

WE DON'T KNOW VERY MUCH ABOUT AIDS...BUT WE <u>DO</u> KNOW WITH COMPLETE CERTAINTY THAT THE VIRUS IS TRANSMITTED FROM ONE PERSON TO ANOTHER EITHER IN BLOOD OR IN SEMEN. IT'S A PECULIAR TRAIT FOR A VIRUS, BUT THERE IT IS.

THIS IS ONE OF THE MOST IMPORTANT PIECES OF INFORMATION WE HAVE SO FAR. IT EXPLAINS, FOR EXAMPLE, WHY THE INITIAL ALARM ABOUT AIDS WAS SOUNDED AMONG HOMOSEXUAL AND BISEXUAL MEN. SOME HOMOSEXUAL SEX PRACTICES NOT ONLY PRODUCE SEMEN BUT MAY ALSO CAUSE SOME BLEEDING... AND, AGAIN, BLOOD AND SEMEN ARE THE ONLY TWO BODY FLUIDS THAT CARRY THE LIVE AIDS VIRUS IN QUANTITIES SUFFICIENT TO BE TRANSMISSABLE.

THAT INFORMATION ALSO EXPLAINS WHY 17 PERCENT OF ALL AIDS CASES ARE INTRAVENOUS DRUG ABUSERS WHO USE A DIRTY NEEDLE THEY'VE BORROWED FROM ANOTHER ADDICT WHO ALREADY HAS AIDS.

WHEN WE FIRST BEGAN TO CONFRONT THE AIDS EPIDEMIC, THE PEOPLE AT HIGHEST RISK WERE HOMOSEXUAL AND BISEXUAL MEN. I'M AFRAID THEY STILL ARE: 2 OF EVERY 3 CASES INVOLVE THESE MEN, EVEN THOUGH THEY'VE BECOME MUCH MORE CAUTIOUS ABOUT THEIR SEXUAL PRACTICES BECAUSE OF THEIR FEAR OF AIDS.

BUT NOWADAYS WE'RE RECEIVING MORE AND MORE REPORTS OF THE AIDS VIRUS OCCURRING AMONG <u>HETEROSEXUAL</u> MEN AND WOMEN WHO ARE <u>NOT I.V.</u> DRUG ABUSERS. IN FACT, THEIR HETEROSEXUAL ACTIVITY SEEMS TO BE THEIR <u>ONLY</u> RISK FACTOR.

AS OF LAST WEEK, 4 PERCENT OF ALL REPORTED AIDS CASES WERE OF HETEROSEXUAL MEN AND WOMEN...A PERCENTAGE, BY THE WAY, THAT'S CLIMBING.

AS I MENTIONED EARLIER, THE NUMBERS OF AIDS CASES WILL INCREASE ABOUT 9-FOLD BETWEEN NOW AND THE YEAR 1991. BUT THE NUMBER OF AIDS CASES INVOLVING <u>HETEROSEXUAL PERSONS</u> WILL INCREASE ABOUT <u>20</u>-FOLD.

OVER THE PAST 5 YEARS, WHEN IT LOOKED AS IF THE KEY GROUP AT RISK WERE HOMOSEXUAL AND BISEXUAL MEN, WE BEAMED TO THEM VIRTUALLY ALL OUR INFORMATION AND EDUCATION EFFORTS. IT WAS EFFECTIVE...AND THEIR BEHAVIOR SEEMS TO HAVE CHANGED.

BUT NOW THAT THE RISE IN THIS DISEASE IS OCCURRING AMONG HETEROSEXUAL MEN AND WOMEN, WE NEED TO DIRECT OUR INFORMATION AND EDUCATION EFFORTS OUT TO THE SOCIETY AT LARGE.

THAT'S VERY HARD TO DO IN THIS COUNTRY. WE'RE A VERY LARGE AND VERY DIVERSE SOCIETY AND THE COST OF SENDING A MESSAGE TO EVERYONE WOULD BE ASTRONOMICAL...IF, IN FACT, IT COULD BE ACHIEVED.

BUT GOVERNMENT HAS A PARTICULARLY DIFFICULT TIME BECAUSE -- FOR REASONS BEST KNOWN TO THE PEOPLE HERE AT THE KENNEDY SCHOOL -- AMERICANS DON'T WANT THEIR GOVERNMENT TO BE THAT MUCH OF A "BIG BROTHER"...REGARDLESS OF HOW WORTHY ITS OBJECTIVE.

SO WE'VE HAD TO SET SOME PRIORITIES AND MAKE SOME TOUGH CHOICES.

AND I THINK WE MADE THE RIGHT CHOICE, WHEN WE DECIDED TO FOCUS ON
INFORMING YOUNG PEOPLE ABOUT THE DANGERS OF AIDS.

HETEROSEXUAL YOUNG PEOPLE ARE NOW AT HIGH RISK, THAT'S TRUE. BUT ALSO THEIR SEXUAL ACTIVITY OVER A LONG PERIOD OF TIME WILL ACTUALLY DETERMINE WHETHER OUR SOCIETY CAN SURVIVE THIS DEVASTATING DISEASE... OR NOT.

WHAT WE'RE DOING, THEN, IS SORTING OUT ALL THE INFORMATION THAT CAN BE LIFE-SAVING FOR SEXUALLY ACTIVE PEOPLE -- AND THAT MEANS ANY MALE OR FEMALE BETWEEN THE AGES OF 12 AND 80.

AND THEN WE'RE FOCUSING ON THOSE PIECES OF INFORMATION THAT ARE ESPECIALLY PERTINENT TO -- AND CAN BE READILY UNDERSTOOD BY -- YOUNG PEOPLE.

THAT WAS THE UNDERLYING PLAN FOR THE <u>SURGEON GENERAL'S REPORT ON</u>
<u>AIDS</u>, WHICH I RELEASED LAST OCTOBER. LET ME TAKE JUST A MINUTE HERE
TO EXPLAIN HOW THAT REPORT CAME ABOUT.

WE HAD BEEN ROUTINELY KEEPING THE PRESIDENT INFORMED OF DEVELOPMENTS ON THE AIDS FRONT. AND THEN, IN LATE 1985, THE TREND LINES BEGAN TO MOVE SHARPLY UPWARD AND OUR CONCERNS DEEPENED. BUT THE AMERICAN PEOPLE STILL SEEMED UNCLEAR ABOUT THE SIGNIFICANCE OF THE DISEASE.

IN FEBRUARY 1986, ON THE DAY AFTER PRESIDENT REAGAN DELIVERED HIS "STATE OF THE UNION" ADDRESS, HE VISITED OUR DEPARTMENT AND ANNOUNCED THAT HE WAS INSTRUCTING THE SURGEON GENERAL TO PULL TOGETHER EVERYTHING WE KNEW ABOUT AIDS AND PUT IT INTO A PLAIN-ENGLISH REPORT TO THE AMERICAN PEOPLE.

FOR THE NEXT 8 MONTHS I MET WITH CONCERNED INDIVIDUALS AND GROUPS FROM ACROSS THE SPECTRUM OF SOCIETY...

GROUPS LIKE THE NATIONAL EDUCATION ASSOCIATION AND THE NATIONAL P.T.A...

THE NATIONAL COUNCIL OF CHURCHES AND THE CHRISTIAN LIFE COMMISSION OF THE SOUTHERN BAPTIST CONVENTION...

THE SYNAGOGUE COUNCIL OF AMERICA AND THE NATIONAL CONFERENCE OF CATHOLIC BISHOPS...

I TALKED WITH THE NATIONAL COALITION OF BLACK AND LESBIAN GAYS AND THE WASHINGTON BUSINESS GROUP ON HEALTH.

I MET WITH THE REPRESENTATIVES OF LOCAL, COUNTY, AND STATE AND TERRITORIAL HEALTH OFFICIALS, ALSO...26 GROUPS IN ALL.

THEY WERE ALL EXTRAORDINARILY CANDID. AND EACH ONE ALSO PLEDGED TO HELP GET MY REPORT INTO THE HANDS OF EVERY AMERICAN.

AFTER 8 MONTHS OF LISTENING AND WRITING, I DELIVERED MY REPORT TO THE CABINET AND TO THE PRESIDENT. IT WAS ACCEPTED...AND I RELEASED IT ON OCTOBER 22, 1986.

INCIDENTALLY, AT <u>NO</u> TIME DID <u>ANYONE</u> SUGGEST TO ME THAT I MAKE A LITTLE CHANGE HERE OR A LITTLE CHANGE THERE. THE FINAL REPORT I RELEASED IN OCTOBER WAS THE EXACT SAME REPORT THAT I PERSONALLY WROTE BETWEEN FEBRUARY AND SEPTEMBER OF LAST YEAR.

AND I CAN FURTHER ASSURE YOU THAT SINCE THAT TIME I HAVE HAD NO MISGIVINGS ABOUT ANYTHING I WROTE.

IT'S TRUE. AND IT STANDS.

I HOPE YOU'VE ALL READ IT. IF NOT, PLEASE GET OUT A PENCIL AND TAKE DOWN THIS ADDRESS:

AIDS...POST OFFICE BOX 14252...WASHINGTON, D.C....20044

OR PICK UP THE PHONE AND CALL AREA CODE 301...443-0292.

LET ME REPEAT THAT FOR YOU:

AIDS...POST OFFICE BOX 14252...WASHINGTON, D.C....20044

OR CALL AREA CODE 301...443-0292.

THERE IS MUCH SCIENTIFIC AND PUBLIC HEALTH INFORMATION IN THAT REPORT, BUT ON THE BEHAVIORAL SIDE, THERE ARE ESSENTIALLY JUST TWO MESSAGES AND I HOPE THEY REACH EVERY ONE OF THIS COUNTRY'S YOUNGSTERS.

THE FIRST MESSAGE IS SIMPLE ENOUGH. IT SAYS...

FIND SOMEONE WHO IS WORTHY OF YOUR RESPECT AND YOUR LOVE...GIVE THAT PERSON BOTH...AND STAY FAITHFUL TO HIM OR HER.

IN OTHER WORDS, SHORT OF TOTAL ABSTINENCE, THE BEST DEFENSE AGAINST AIDS IS TO MAINTAIN A FAITHFUL, MONOGAMOUS RELATIONSHIP IN WHICH YOU HAVE ONLY ONE CONTINUING SEXUAL PARTNER...AND THAT PERSON IS AS FAITHFUL AS YOU ARE.

MY ADVOCACY OF MONOGAMY MAY SOUND LIKE A MORALITY LESSON, BUT THIS IS A SITUATION IN WHICH MORALITY AND SCIENCE HAPPEN TO WALK HAND-IN-HAND.

MY SECOND MESSAGE IS FOR PEOPLE WHO DON'T YET HAVE A FAITHFUL MONOGAMOUS RELATIONSHIP FOR WHATEVER REASON. THE MESSAGE IS... CAUTION: IT'S IMPORTANT THAT YOU KNOW WITH ABSOLUTE CERTAINTY THAT NEITHER YOU NOR YOUR PARTNER IS CARRYING THE AIDS VIRUS. IF YOU'RE NOT ABSOLUTELY CERTAIN, THEN YOU MUST TAKE PRECAUTIONS.

LOOK AT IT THIS WAY: STRICTLY FROM THE POINT OF VIEW OF EPIDEMI-OLOGY, WHEN YOU HAVE SEX WITH SOMEONE, YOU'RE ALSO HAVING SEX WITH EVERYONE ELSE WITH WHOM THAT PERSON HAS HAD SEX. AND, CONSIDERING THE LONG INCUBATION PERIOD FOR THE AIDS VIRUS, WE'RE TALKING ABOUT THAT PERSON'S HISTORY OF SEXUAL RELATIONS GOING BACK 10 YEARS.

EVEN WITH THIS KIND OF INFORMATION AVAILABLE, THERE WILL ALWAYS BE SOME PEOPLE WHO WON'T ABSTAIN YET WON'T ACHIEVE A FAITHFUL MONOGAMOUS RELATIONSHIP EITHER. THEREFORE, THEY MAY EXPOSE THEMSELVES AND OTHERS TO THE AIDS VIRUS.

TO SUCH FOOL-HARDY INDIVIDUALS I OFFER THE FOLLOWING ADVICE:

- * DON'T HAVE SEX WITH SOMEONE WHO ALREADY <u>HAS</u> AIDS. THAT'S OBVIOUS ENOUGH.
- * DON'T HAVE SEX WITH SOMEONE WHO COULD BE CARRYING THE AIDS VIRUS...A PERSON, FOR EXAMPLE, WHO PRACTICES HIGH-RISK BEHAVIOR. THAT INCLUDES HOMOSEXUALS, INTRAVENOUS DRUG USERS, PROSTITUTES AND OTHER PERSONS WHO HAVE MANY DIFFERENT SEX PARTNERS. AND THE SAME MESSAGE GOES TO ANY OF THOSE HIGH-RISK INDIVIDUALS.
- * AND FINALLY, IF YOU <u>DO</u> DECIDE TO HAVE SEX WITH SUCH A PERSON ANYWAY, THEN -- IF YOU'RE A MAN -- USE A CONDOM FROM START TO FINISH. IF YOU'RE A WOMAN, MAKE SURE YOUR MALE PARTNER USES A CONDOM...AGAIN, FROM START TO FINISH.

A CONDOM WON'T PROVIDE 100 PERCENT PROTECTION -- FEW THINGS IN LIFE <u>DO</u> -- BUT SO FAR IT SEEMS TO BE THE BEST PROTECTION AVAILABLE.

IF SEXUALLY ACTIVE PEOPLE WILL HEED THESE MESSAGES, THEY WILL ACHIEVE A HIGH DEGREE OF PROTECTION AND WILL MOST LIKELY NOT BE INFECTED WITH THE AIDS VIRUS.

WHAT ELSE CAN WE DO TO COMBAT THIS TERRIBLE DISEASE?

IN MY REPORT ON AIDS, I ALSO ADVISE PEOPLE TO AVOID CERTAIN SPECIFIC SEX PRACTICES INVOLVING PARTNERS WHO ARE AT HIGH RISK. SUCH PRACTICES INCLUDE MOUTH CONTACT WITH THE PENIS, VAGINA, AND RECTUM... ANY PRACTICES WHICH CAN CAUSE CUTS OR TEARS IN THE LININGS OF THE RECTUM, VAGINA, OR PENIS...AND HAVING SEX WITH FEMALE OR MALE PROSTITUTES.

I ALSO STRONGLY ADVISE PEOPLE TO STAY CLEAR OF DRUGS AND ALCO-HOL, BECAUSE THESE SUBSTANCES LOWER YOUR ABILITY TO THINK CLEARLY AND PROTECT YOURSELF FROM DANGER...ESPECIALLY THE DANGER OF HAVING SEX WITH AN AIDS-INFECTED PARTNER.

SOME PEOPLE OBJECT TO MY ADVICE BECAUSE ITS SOUNDS TOO MUCH LIKE A LESSON IN MORALITY. AND I GUESS IT DOES. BUT I HONESTLY <u>DO</u>
RECOGNIZE THAT MY JOB AS SURGEON GENERAL IS <u>NOT</u> PRIMARILY TO MAKE EVERYBODY A MORAL PERSON, MUCH AS I PERSONALLY MIGHT WANT THAT.

RATHER, I'M OFFERING MY ADVICE SO THAT EVERYBODY WILL BE A <u>LIVE</u> PERSON. AND HELPING YOU <u>PROTECT YOUR LIFE IS</u> MY JOB.

NOW, LET ME PAUSE FOR A MOMENT AND FOCUS ON AN ISSUE THAT IS GAINING ALMOST AS MUCH ATTENTION AS THE AIDS VIRUS ITSELF. THE ISSUE IS...HOW SHOULD WE EDUCATE OUR YOUNG PEOPLE ABOUT AIDS AND ABOUT THEIR SEXUALITY. HOW SHOULD WE DO IT? WHO SHOULD DO IT? AND WHEN?

WHEN I TALK TO ADULTS ABOUT THE AIDS PROBLEM AND I MAKE SOME OF THESE DETAILED REFERENCES TO CERTAIN HIGH-RISK SEX PRACTICES, I GET A VARIETY OF REACTIONS: DISMAY, SADNESS, EMBARRASSMENT, DISCOMFORT, OR ANGER.

BUT THE REACTION I GET MOST OFTEN FROM YOUNG PEOPLE IS CURIOSITY AND EAGERNESS FOR MORE KNOWLEDGE:

THEY'RE STILL LEARNING ABOUT THEIR BODIES AND THEIR EMOTIONS...

THEY'RE STILL UNSURE ABOUT THEIR OWN SEXUALITY...

AND THEY STILL HAVE THAT PRICELESS OPTIMISM ABOUT THE WORLD AND THE PEOPLE IN IT, AN OPTIMISM THAT MOST ADULTS HAVE HAD TEMPERED BY THE FACTS OF DAY-TO-DAY LIVING IN THE REAL WORLD.

I PREFER TO SPEAK ABOUT THE NEED FOR "AIDS EDUCATION." AND I TRULY BELIEVE WE NEED SUCH EDUCATION AT THE APPROPRIATE AGE LEVEL IN THE SCHOOLS OF AMERICA.

BUT I ALSO RECOGNIZE THAT, FOR MANY YOUNG PEOPLE, SUCH EDUCATION MAY BE FRIGHTENING...OR PUZZLING...OR BOTH.

HENCE, I BELIEVE THAT THE MOST SIGNIFICANT ACTION OUR SOCIETY MIGHT TAKE TO PROTECT ITS YOUNG PEOPLE FROM THE MORTAL THREAT OF AIDS IS TO PROVIDE THEM WITH EDUCATION CONCERNING THEIR OWN SEXUALITY... EDUCATION THAT IS FACTUALLY CORRECT, PERSONALLY SENSITIVE, AND MORALLY STRONG.

THE TERM "SEX EDUCATION" IS ONE I'M NOT AT ALL COMFORTABLE WITH BECAUSE IT TENDS TO POLARIZE THE AUDIENCE. ALSO, IN MY VIEW, "SEX EDUCATION" USUALLY MEANS A COURSE OF INSTRUCTION THAT IS MUCH TOO LIMITED. LET ME EXPLAIN WHAT I MEAN BY THAT.

MOST OF THE TIME, WHEN YOU HEAR THE PHRASE, "SEX EDUCATION," YOU IMMEDIATELY THINK OF CLASS HOURS DEVOTED TO HUMAN REPRODUCTIVE BIOLOGY, INCLUDING CAREFULLY PHRASED EXPLANATIONS ABOUT THE USE AND ABUSE OF THE MALE AND FEMALE GENITALIA.

I'M TOLD THAT YOUNG PEOPLE CALL THESE CLASSES "ORGAN RECITALS."

MOST SCHOOLS NOW OFFER THIS MINIMUM KIND OF SEX EDUCATION SOME TIME DURING THE JUNIOR HIGH OR MIDDLE SCHOOL YEARS AND THAT'S A GOOD THING, ALTHOUGH IT MIGHT BE A LITTLE LATE. I PERSONALLY WOULD URGE THAT THE MATERIAL BE PRESENTED EARLIER, AMONG THE 9-, 10-, AND 11-YEAR-OLDS.

OF COURSE, <u>DEVELOPMENTAL</u> AGE IS MORE IMPORTANT THAN CHRONOLOGICAL AGE. ALSO, COMMUNITY STANDARDS, WHICH VARY FROM PLACE TO PLACE, MUST BE TAKEN INTO ACCOUNT.

NEVERTHELESS, CHILDREN FROM 4 TO 6 ASK QUESTIONS ABOUT SEX, BUT THESE QUESTIONS USUALLY INVOLVE THEIR OWN ANATOMY AND THE MYSTERY OF "WHERE DO BABIES COME FROM?"

THEN FOR SEVERAL YEARS, UNTIL ABOUT AGE 9, CHILDREN SEEM TO LOSE INTEREST IN MATTERS INVOLVING SEX. BUT AT AGE 9 OR SO A NEW INTEREST DEVELOPS, AND THEIR QUESTIONS -- IF THEY ARE EVEN <u>ASKED</u> -- MAY BE QUITE SOPHISTICATED.

I'M NOT RIGID ABOUT THE AGES. <u>DEVELOPMENTAL</u> AGE IS MUCH MORE IMPORTANT A MEASURE THAN CHRONOLOGICAL AGE ANYWAY.

IN ANY CASE, GRADE-SCHOOL CHILDREN ARE EXTREMELY CURIOUS ABOUT THEMSELVES. THEY ARE ALSO KINDER AND MORE GENEROUS THAN OLDER CHILDREN...OR EVEN MOST ADULTS, FOR THAT MATTER. AND THEY ARE, ABOVE ALL, SUSCEPTIBLE TO BEING LOVED AND TO OFFERING MUCH LOVE IN RETURN.

AND SEX EDUCATION WITHOUT THE CONCEPT OF LOVE AND RESPONSIBILITY IS LIKE A PIECE OF PIE THAT'S ALL CRUST AND NO FILLING.

MY OWN PREFERENCE, THEREFORE, WOULD BE TO HAVE OUR ELEMENTARY SCHOOLS INTRODUCE CHILDREN TO THE SUBJECT OF REPRODUCTIVE BIOLOGY WITHIN A MORE GENERAL DISCUSSION OF THE NATURE OF <u>SENSITIVE AND</u> AFFIRMATIVE HUMAN RELATIONS.

THAT'S EASIER TO SAY THAN TO DO, I KNOW. AND FURTHERMORE, SOME PARENTS GET UNEASY ABOUT HAVING THE SCHOOLS IMPART CERTAIN HUMAN VALUES TO THEIR CHILDREN. THEY THINK THAT SUCH INSTRUCTION SHOULD BE DONE AT HOME.

AND I AGREE. I ALWAYS HAVE, AND THIS GOES BACK MANY YEARS DURING ALL THE TIME I PRACTICED MEDICINE. MY ADVICE TO PARENTS WAS ALWAYS THE SAME:

THE SOCIAL AND SPIRITUAL DEVELOPMENT OF <u>YOUR</u> CHILDREN IS <u>YOUR</u>

<u>BUSINESS</u>. <u>DON'T</u> PASS IT UP...<u>DON'T</u> PASS IT BY...<u>PASS</u> IT <u>ON</u>.

AND MOST PARENTS WOULD AGREE WITH ME 100 PERCENT. BUT MANY OF THEM, I HAVE TO CONFESS, NEVER DID MUCH MORE THAN AGREE WITH ME.

THAT'S BEEN A DISAPPOINTMENT, AND LATELY, IN LIGHT OF AIDS, I'VE WONDERED WHY THIS WAS SO.

I DON'T HAVE THE ULTIMATE ANSWER. BUT I THINK I HAVE A SENSE OF THE PROBLEM.

I'M SURE MANY PARENTS HAVE TROUBLE DEALING WITH THE PHYSIOLOGY AND BIOLOGY OF SEX MAINLY BECAUSE <u>THEY</u> DIDN'T GET ANY OF THIS INFORMATION WHEN <u>THEY</u> WERE KIDS EITHER. AND THEY FEEL INADEQUATE.

TO PARAPHRASE THE WINE-TASTER'S BASIC COMMENT:

"IT'S A GOOD EXCUSE...BUT IT'S NOT A GREAT EXCUSE."

MANY PARENTS ALSO REGARD ANY TALK ABOUT SEX AS A KIND OF INVASION OF PRIVACY -- THEIR OWN AS WELL AS THEIR CHILDREN'S. TALK ABOUT SEX IS BEDROOM AND BATHROOM TALK...AND THOSE TWO ROOMS ARE UNIVERSALLY REGARDED AS THE TWO MOST PRIVATE ROOMS IN ANYONE'S HOUSE.

SO PARENTS' UNCERTAINTY ABOUT THE <u>BIOLOGY</u> OF SEX AND THEIR SENSITIVITY TO THE <u>PRIVACY</u> OF SEX SEEM TO BE TWO REASONS WHY THEY HAVE A HARD TIME WITH "SEX EDUCATION."

BUT THERE'S A THIRD REASON, ALSO, WHICH MAY BE THE MOST IMPORTANT REASON OF ALL AND THE MOST DIFFICULT ONE TO DEAL WITH. IT HAS TO DO WITH THE NATURE AND THE QUALITY OF OUR ADULT HUMAN RELATIONSHIPS.

AS I INDICATED EARLIER, "SEX EDUCATION" MEANS MORE TO ME THAN JUST ANOTHER "ORGAN RECITAL." "SEX EDUCATION" OUGHT TO DEAL WITH RELATIONSHIPS BETWEEN MEN AND WOMEN THAT ARE LOVING, CARING, RESPECT-FUL, AND TOLERANT.

SUCH RELATIONSHIPS INCLUDE SOME FULFILLING SEXUAL ACTIVITY, BUT THEY ARE NOT DEFINED ONLY BY THAT ACTIVITY. THERE'S MUCH MORE TO HUMAN RELATIONSHIPS THAN JUST "GOOD SEX." AND YOUNG PEOPLE OUGHT TO BE ADVISED OF THAT.

FOR MOST ADULTS, A SATISFYING RELATIONSHIP HOLDS IN A COMFORTABLE BALANCE THE EMOTIONAL, INTELLECTUAL, PHYSICAL, AND SEXUAL FACTORS THAT MAKE UP THAT RELATIONSHIP.

EVERYONE DREAMS OF SUCH A RELATIONSHIP. IF WE MEET A MAN OR WOMAN WHO CAN GIVE US THAT KIND OF RELATIONSHIP, WE WILLINGLY GIVE HIM OR HER OUR LIFELONG PROMISE.

NOVELISTS CALL IT "TRUE LOVE." SOCIOLOGISTS CALL IT "MARITAL FIDELITY." THE SURGEON GENERAL CALLS IT "MONOGAMY." BUT WHATEVER YOU CALL IT, WE ALL WANT THAT WELL-ROUNDED, BALANCED, LOVING, AND FULLY CONSIDERATE RELATIONSHIP...A RELATIONSHIP THAT'S ENRICHED BY SEX, NOT OVERWHELMED BY IT OR DEVOID OF IT EITHER.

FOR MANY PEOPLE, SUCH A BALANCED RELATIONSHIP IS AN IDEAL...BUT "REAL LIFE" ISN'T ALWAYS LIKE THAT. IT'S IMPERFECT...IT'S GIVE-AND-TAKE.

GROWN-UPS KNOW ABOUT HUMAN IMPERFECTION. BUT CHILDREN DON'T.

AND GROWN-UPS CAN DEAL WITH HUMAN IMPERFECTION. BUT CHILDREN CAN'T...UNLESS WE HELP THEM.

WITHOUT A COMPASSIONATE UNDERSTANDING OF THE IMPERFECT NATURE OF MANY HUMAN RELATIONSHIPS, A CHILD'S EDUCATION WILL BE...ITSELF...VERY IMPERFECT.

SO IF PARENTS ARE TO EDUCATE THEIR CHILDREN ABOUT HUMAN RELATION-SHIPS -- SEXUAL AND OTHERWISE -- THEY MUST FIRST UNDERSTAND AND ACCEPT THE NATURE OF THEIR OWN. FOR MANY, THAT'S HARD TO DO.

PARENTS -- ADULTS -- ARE NOT VERY GOOD ABOUT TALKING <u>TO EACH</u>

<u>OTHER</u> ABOUT THEIR SEXUALITY. THEY FEEL FRUSTRATED, GUILTY, AND EVEN

ANGRY ABOUT THEIR INABILITY TO DO THE THING THAT THEY KNOW -
INTELLECTUALLY AND EMOTIONALLY -- THEY <u>SHOULD</u> DO.

BUT THEY CAN'T.

IS IT ANY WONDER, THEN, THAT MANY PARENTS HAVE DIFFICULTY TELLING CHILDREN ABOUT THE FULL-DIMENSIONAL NATURE OF AN IDEAL HUMAN RELATION-SHIP.

NEVERTHELESSS, I WANT PARENTS TO TRY. I WANT PARENTS TO DO THIS WITH COMPASSION...WITH RESPECT AND WITH LOVE...AND WITH SOME UNDERSTANDING NOT JUST OF THE CHILD WHO'S <u>LISTENING</u>...BUT ALSO OF THE ADULT WHO IS <u>SPEAKING</u>. AND THAT'S EVEN <u>HARDER</u> TO DO.

STILL, IT RENMAINS AS MY SINCEREST WISH THAT THE <u>PARENTS</u> OF THIS COUNTRY WILL BE THE PRIMARY TEACHERS OF SEX AND HUMAN RELATIONS TO THE CHILDREN OF THIS COUNTRY.

I SAY THAT, KNOWING FULL WELL THAT SOME PARENTS SIMPLY CAN'T DO IT. WHEN THAT'S THE CASE, THEN I BELIEVE THERE'S A COMPELLING SOCIAL NEED FOR OUR SCHOOLS, CHURCHES, SYNAGOGUES, AND OTHER COMMUNITY INSTITUTIONS TO DO WHATEVER POSSIBLE TO PROVIDE OUR CHILDREN WITH THE MOST HELPFUL KINDS OF INFORMATION.

OUR CHILDREN DON'T LIVE IN A VACUUM, AS WE ALL KNOW. THEY LIVE IN A REAL WORLD OF PLEASURE AND DANGER, ALONG WITH THE REST OF US.

BUT WE HAVE SOME EXPERIENCE WITH IT AND SOME SENSE OF HOW TO SURVIVE IN IT WITH OUR LIVES AND OUR VALUES INTACT.

I BELIEVE, THEREFORE, THAT EACH OF US -- IN OUR HOMES OR IN OUR SCHOOLS -- HAS THE MORAL RESPONSIBILITY TO PASS THAT INFORMATION ON TO OUR CHILDREN.

I CAN TELL YOU THAT THE GOVERNMENT -- THE U.S. PUBLIC HEALTH SERVICE IN PARTICULAR -- WILL HELP IN ANY WAY WE CAN. AS THE SURGEON GENERAL, I'LL CONTINUE TO TRY TO GIVE THAT EFFORT SOME LEADERSHIP, ALSO.

BUT THERE ARE LIMITS TO WHAT THE GOVERNMENT CAN AND OUGHT TO DO. THE TASK BASICALLY BELONGS TO THE HOME AND TO LOCAL SCHOOLS AND OTHER COMMUNITY INSTITUTIONS. IT SHOULD NOT BE LEFT, BY DEFAULT, TO THE MOVIES, TELEVISION, OR THE STREET-CORNER. WE CAN'T DO THAT, AND STILL PROTECT THE MILLIONS OF YOUNG LIVES THAT ARE AT RISK OF AIDS.

THIS HAS BEEN A GRIM MESSAGE AND I GUESS I AM A GRIM COURIER. I ONLY HOPE THAT EVERY AMERICAN WHO HEARS OR READS MY MESSAGE, WILL BELIEVE IT AND DO HIS OR HER PART TO STOP THE SPREAD OF AIDS...PROTECT AND SAVE THE LIVES OF PEOPLE AT RISK, INCLUDING UNSUSPECTING YOUNG PEOPLE...AND RETURN HUMAN SEXUALITY BACK TO ITS RIGHTFUL PLACE: PART OF THE TOTAL COMPLEX OF HUMAN, CARING INTERPERSONAL RELATIONS.

SUCH RELATIONS OUGHT TO BE POSITIVE, HOPEFUL, AND SAFE. IN MY BOOK, THAT'S THE MEANING OF THE PHRASE "TRUE LOVE."

WHICH LEADS ME TO MY FINAL WORD. IT'S NOT MINE REALLY. IT'S THE LAST SENTENCE OF THE BRIDGE OF SAN LUIS REY, THE LITTLE NOVEL WRITTEN BY THORNTON WILDER, WHO FOR A WHILE WAS A FAVORITE LECTURER HERE AT HARVARD. WILDER CONCLUDED THAT NOVEL BY OBSERVING...

"THERE IS A LAND OF THE LIVING AND A LAND OF THE DEAD AND THE ONLY BRIDGE IS LOVE...THE ONLY SURVIVAL, THE ONLY MEANING."

THANK YOU.

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