## William F. Buckley Jr. Reservations About Dr. Koop's Advice . . .

When Dr. C. Everett Koop, who is the surgeon general of the United States, issues a report on sex education, taking the position normally associated with the permissivists, one draws back from the conventional position and reflects. Is there something to recommend "sex education"?

It pays to remember that Dr. Koop is not merely an M.D. He is very much the moralist. Well before he became the surgeon general, he teamed up with the Rev. Francis Schaeffer, the late theologian, and produced a sixhour documentary on the subject of abortion. which in Dr. Koop's judgment is out-and-out murder. He is a practicing Christian and an evangelical, and now he comes out for sex education of the kind generally opposed by moralists of Dr. Koop's persuasion. What are his arguments?

The 34-page report issued by the surgeon general's office is the first that addresses directly the problem of AIDS. It begins by telling us something every newspaper reader knows, namely that the disease continues to spread, and that the figures are very discouraging. Fifteen thousand people are dead of the disease already, and 12 times that number will be dead of it within five years.

Now Dr. Koop did not need to tell any informed American how to slow down the spread of the disease to protect the uncontaminated. That's easy: don't use a needle for drugs, and don't have sex except with uncontaminated people. But the trouble with advice that simple, Dr. Koop (and, of course, others) is saying now is that we are not talking about counsels of angelism. We are talking, to use a phrase, about how the world works.

On the matter of intravenous infection, protection is as simple as using a needle that isn't infected, and that isn't all that difficult to do provided the needle-user breaks out of the hypnotic allure of needle-sharing and insists on using a hygienic vehicle for his poison. In the matter of sex, "the best protection against infection right now, barring abstinence," writes Dr. Koop, "is use of a condom." So therefore? Teach children to use condoms.

We got that right? No no no: teach children NOT to have sex. Dr. Koop the moralist would say: but then teach them that should they fall into the temptation of doing so, they should use a condom. What Dr. Koop opposes is "silence" on the subject. "This silence must end. We can no longer afford to sidestep frank, open discussion about sexual practices-homosexual and heterosexual. Education about AIDS should start at an early age so that children can grow up knowing the behaviors to avoid to protect themselves from exposure to the AIDS virus."

One greets such advice, so apparently reasoned and compelling, with residual reservations. To begin with, we know that there seems to be a correlation between sex education and pregnancies. The great Scandinavian experiment, which is now over a generation old, has brought to that part of the world not only sex education, but an increase in pregnancies among children. It might be argued that there would be still more pregnancies but for the sex education, but Dr. Koop does not appear to be saying the equivalent thing in respect of AIDS. He says that if the sex education he favors were undertaken, one might save 14,000 lives by 1991.

Surely there is something to be said for the stimulation of a national habit. I can think of one that is gradually taking hold, namely the use of the seat belt. In some states it is now compulsory, though my own experience is that some people use a seat belt and others do not, and there is little correspondence between the use of it where it is required and where it is not required. If children were taught that, all other considerations to one side, the condom should always be associated with sex even as the safety belt should always be associated with driving, some progress of the kind Dr. Koop seeks could be expected. There is abundant evidence that the mature homosexual community is, so to speak, seatbelt oriented nowadays in a sense that it was most definitely not even a year or so back.

But to teach about the condom, and to go the logical step further of supplying the condom (for the sake of the young inflamed who have not thought to bring along their own), is arguably to induce an atmosphere in which the Scandinavian analogy becomes directly relevant. If the utilitarian emphasis is stressed, it may well be at the expense of the ethical emphasis—which returns us to the question of which of the two should take precedence, among teachers and parents.

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