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BY

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U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



PRESENTED TO THE SURGEON GENERAL'S WORKSHOP ON
SELF-HELP AND PUBLIC HEALTH
LOS ANGELES, CALIFORNIA
SEPTEMBER 20, 1987

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

I WANT TO WELCOME EVERYONE OF YOU TO THIS, THE FIRST SURGEON GENERAL'S WORKSHOP ON SELF-HELP AND PUBLIC HEALTH.

I AM DELIGHTED THAT SUCH A GREAT NUMBER OF SELF-HELP AND MUTUAL-HELP ORGANIZATIONS FROM ACROSS THE COUNTRY ARE REPRESENTED HERE. I KNOW THAT FOR MANY OF YOU, TRAVEL TO THIS WORKSHOP WAS POSSIBLE ONLY AT A GREAT PERSONAL SACRIFICE OF TIME AND MONEY, NOT TO MENTION ENERGY.

I HOPE THAT YOUR EXPERIENCE, HOWEVER, WILL RE-PAY YOU A HUNDRED TIMES OVER.

YOU WON'T GET YOUR MONEY BACK, I'M AFRAID...

AND THE TIME IS GONE FOREVER, WE KNOW THAT ONLY TOO WELL...

AND AS FOR YOUR ENERGY, I'M SURE YOU'LL GET BACK ALL THE CALORIES YOU WILL HAVE BURNED AT THIS WORKSHOP. AND WITH A LITTLE LUCK, YOU MIGHT NOT GET BACK EVERY LAST ONE.

BUT I HOPE YOU'LL GET FROM THIS WORKSHOP AT LEAST A HUNDRED NEW NAMES AND ADDRESSES OF PEOPLE WHO ARE LABORING LONG AND HARD TO HELP THEMSELVES AND, AT THE SAME TIME, HELP OTHERS AS WELL TO MAKE IT THROUGH LIFE...MAKE IT THROUGH THE WEEK...MAKE IT THROUGH THE DAY...ONE DAY AT A TIME.

I MENTION THIS BECAUSE THIS QUESTION CAME UP IN A CONVERSATION A WHILE BACK WITH SEVERAL OF MY COLLEAGUES IN MEDICINE. ONE OF THEM SAID, "DR. KOOP, ARE YOU GOING TO INVEST THE POWER AND PRESTIGE OF YOUR OFFICE IN THE SELF-HELP MOVEMENT? AND DO YOU THINK THAT'S A WISE THING TO DO?"

MY ANSWER WAS, "YES...BECAUSE I BELIEVE IN SELF-HELP AS AN EFFECTIVE WAY OF DEALING WITH PROBLEMS, WITH STRESS, HARDSHIP AND PAIN."

THEREFORE, I HAVE CALLED US TOGETHER FOR THESE TWO DAYS TO DISCUSS HOW SELF-HELP AND PUBLIC HEALTH CAN WORK MORE CLOSELY TOWARD A COMMON GOAL OF PERSONAL WELL-BEING.

I KNOW THIS WILL BE AMONG THE ISSUES YOU'LL BE DISCUSSING HERE TODAY AND TOMORROW.

POSSIBLY BY THE FINAL SESSION WE WILL HAVE COLLECTIVELY SHED SOME NEW LIGHT ON THE POTENTIAL CONTRIBUTION OF GOVERNMENT TO THE SELF-HELP MOVEMENT AND HOW THE PUBLIC HEALTH SERVICE CAN ACKNOWLEDGE MORE FULLY THE BENEFITS OF SELF-HELP IN HEALTH CARE DELIVERY.

AND WHILE YOU STILL HAVE SOME QUESTIONS TO BE ANSWERED, RELATIVE TO THE FUTURE OF THE MUTUAL HELP/SELF-HELP MOVEMENT, WE IN GOVERNMENT -- AND IN THE INSTITUTION OF PUBLIC HEALTH ITSELF -- NEED YOUR ASSISTANCE TO HELP FIND ANSWERS TO SOME FUNDAMENTAL QUESTIONS.

AND LET ME SHARE TWO OF THE QUESTIONS WITH YOU:

THE FIRST ONE IS..."WHAT DO WE WANT TO DO?"

AND THE SECOND ONE IS..."WHAT DO WE HAVE TO KNOW...TO DO IT WELL?"

THEY SOUND SIMPLE ENOUGH. BUT DON'T BE FOOLED BY THAT. THESE ARE THE TWO QUESTIONS THAT CHALLENGE HEALTH POLICY-MAKERS AND HEALTH CARE PROVIDERS AND EVERYONE ELSE INVOLVED IN MAINTAINING AND IMPROVING THE HEALTH OF AMERICANS.

"WHAT DO WE WANT TO DO?"

I CAN REMEMBER BACK TO THE DARK AGES, WHEN I WAS IN MEDICAL SCHOOL, AND WE WERE TAUGHT HOW TO DIAGNOSE AND TREAT PATIENTS WITH A VARIETY OF DISEASES AND CONDITIONS.

WHAT DID WE WANT TO DO? WE WANTED TO CURE PEOPLE...WE WANTED TO TAKE THEIR HURT AND BROKEN BODIES -- AND MINDS, TOO -- AND WE WANTED TO REPAIR THEM.

TODAY, THAT'S NOT ENOUGH OF A BASIS TO BUILD A SYSTEM OF HEALTH CARE IN THIS COUNTRY.

TODAY...THE ANSWER IS A LITTLE DIFFERENT. CURING AND REPAIRING ARE NO LONGER ENOUGH. THEY ARE ONLY PART OF THE TOTAL HEALTH CARE THAT MOST PEOPLE REQUIRE.

FOR ONE THING, PEOPLE DON'T SHOW UP ON A DOCTOR'S DOORSTEP ANYMORE WITH A CLEAR CASE OF "X" OR "Y" OR "Z."

ACCORDING TO A NATIONAL SURVEY OF PHYSICIANS' PRACTICES, THE TOP REASON WHY PEOPLE VISIT THE DOCTOR IS CALLED A "CONDITION WITHOUT SICKNESS."

OF COURSE, THE PATIENT DOES HAVE TROUBLE OF SOME KIND. BUT IT IS NOT A TRADITIONAL FORM OF "SICKNESS." IT IS A "CONDITION WITHOUT SICKNESS."

MEDICAL SCHOOLS AND OTHER PROFESSIONAL SCHOOLS HAVEN'T QUITE CAUGHT UP WITH THIS PHENOMENON, BUT THE REST OF THE COUNTRY HAS.

AND I BELIEVE THIS IS A KEY ASPECT OF THE WORK OF MUTUAL HELP AND SELF-HELP GROUPS.

THE PARENT OF AN ALCOHOLIC CHILD...THE CHILD IN AN ALCOHOLIC HOUSEHOLD...A GRIEVING, SURVIVING SPOUSE...A PERSON DISFIGURED IN AN AUTO ACCIDENT OR A FIRE...AN INFERTILE COUPLE...WHEN THESE AND AN ESTIMATED 15 MILLION OTHER PEOPLE SEEK SOME KIND OF HELP, ARE THEY REALLY "SICK"?

OF COURSE NOT. BUT THEY DO NEED HELP.

THESE "CONDITIONS WITHOUT SICKNESS," WHILE NOT THE TOTAL PICTURE OF THE HEALTH STATUS OF AMERICANS BY ANY MEANS, ARE A VERY LARGE AND SIGNIFICANT PART OF THAT PICTURE.

I CAN SAY THAT BECAUSE -- GENERALLY SPEAKING -- MOST AMERICANS ARE IN GOOD TO EXCELLENT HEALTH, BY ALL THE ROUTINE, TRADITIONAL STANDARDS.

* LIFE EXPECTANCY IS AT A NEW RECORD HIGH. A CHILD BORN TODAY CAN EXPECT TO LIVE, ON THE AVERAGE, TO THE AGE OF 74 AND A HALF.

AND EVEN PEOPLE AT MY AGE ARE DOING BETTER. AGAIN, ON THE AVERAGE, YOU AND I WILL HAVE A YEAR OR TWO MORE OF LIFE THAN OUR PARENTS HAD...AND SEVERAL MORE YEARS THAN OUR GRAND-PARENTS HAD.

I THINK THIS PARTICULAR STATISTIC IS MORE IMPORTANT TO MOST AMERICAN FAMILIES THAN THE LATEST DOW JONES AVERAGE.

* AND HERE'S ANOTHER ONE: THE AGE-ADJUSTED DEATH RATE FOR STROKE -- THE THIRD LEADING CAUSE OF DEATH IN OUR COUNTRY -- IS DOWN AGAIN. TODAY THE MORTALITY RATE FOR STROKE IS HALF WHAT IT WAS ONLY 15 YEARS AGO. AND IT STILL SEEMS TO BE FALLING BY ABOUT 5 PERCENT A YEAR.

* THE SAME IS TRUE FOR HEART DISEASE, THE NUMBER ONE CAUSE OF DEATH IN OUR SOCIETY. NOT AS DRAMATIC A CHANGE, BUT THE RATE IS DROPPING NEVERTHELESS...A COUPLE OF POINTS A YEAR IS A SIGNIFICANT NUMBER FOR THIS CATEGORY OF DISEASE.

YOU CAN TELL FROM THESE KINDS OF STATISTICS THAT WE'RE MAKING GOOD PROGRESS ACROSS A BROAD FRONT OF ACUTE AND CHRONIC CONDITIONS.

BUT NONE OF THIS PROGRESS IS BASED ON NEW MIRACLE CURES. SOME OF IT MAY BE BASED ON NEW KINDS OF SURGERY -- BY-PASSES, FOR EXAMPLE -- BUT AGAIN, NOT MUCH.

SO YOU HAVE TO CONCLUDE THAT ALL THIS PROGRESS IN HEALTH IS TAKING PLACE BECAUSE SOMETHING ELSE IS GOING ON...SOMETHING OTHER THAN WHAT FORMAL, TRADITIONAL MEDICINE CAN OFFER.

IT IS NO SINGLE THING THAT'S HAPPENING. IT IS RATHER A CONSTELLATION OF ACTIONS AND ATTITUDES THAT HAVE CAPTURED THE IMAGINATION...AND THE TIME...OF THE AMERICAN PEOPLE.

IT'S PEOPLE JOINING TOGETHER TO PROVIDE EMOTIONAL SUPPORT TO ONE ANOTHER AND TO SHARE INFORMATION ABOUT A COMMON HEALTH CONCERN THEY HAVE EXPERIENCED.

SO I THINK WE HAVE OUR ANSWER TO THE FIRST QUESTION: THAT IS, "WHAT DO WE WANT TO DO?"

THE ANSWER IS THAT WE WANT TO PROMOTE GOOD HEALTH AND WE WANT TO PREVENT ACUTE AND CHRONIC DISEASE FROM OCCURRING. THAT'S THE CLEAR DIRECTION IN WHICH WE'RE GOING.

NOW...WHAT ABOUT THE SECOND QUESTION..."WHAT DO WE HAVE TO KNOW...TO DO IT WELL?"

YES, WE NEED TO KNOW SOMETHING ABOUT MONOCLONAL ANTIBODIES AND PEPTIDE SYNTHESIS. WHETHER WE REALIZE IT OR NOT, GOOD SCIENCE IS ALWAYS THE BASIS OF GOOD HEALTH.

BUT WE NEED TO KNOW A LOT OF THINGS THAT ARE NEW TO SCIENCE. AND THEY INCLUDE...

- * THE WAY PEOPLE BEHAVE AS HUMAN BEINGS...
- * THE WAY PEOPLE INTERACT WITH EACH OTHER AND WITH PHYSICAL ENVIRONMENT...
- * HOW PEOPLE PERCEIVE AND RESPOND TO SUCH LIFE-CYCLE EVENTS AS CHILDBIRTH, FAMILY GROWTH AND DEPARTURE. AND DEATH ITSELF...
- * THE WAY PEOPLE COPE WITH ECONOMIC, SOCIAL, AND CULTURAL STRESS...
- * AND HOW PEOPLE PERCEIVE THE FUTURE -- WHETHER SHORT-TERM OR LONG-TERM -- AND HOW THEY SEE THEMSELVES IN IT.

THIS IS THE INFORMATION THAT TELLS US NOT ONLY ABOUT HEALTH ...BUT ABOUT WHOLENESS.

AND WHERE WILL THIS KNOWLEDGE COME FROM?

FROM RESEARCH IN BEHAVIOR? SOME OF IT, YES.

FROM RESEARCH IN MEDICINE AND THE OTHER LIFE SCIENCES? YES,
SOME FROM THERE, TOO.

BUT TO MY WAY THINKING, A GREAT DEAL OF THE NEW INFORMATION
ABOUT HEALTH IN AMERICA CAN COME FROM GROUPS SUCH AS THE ONES
REPRESENTED HERE THIS WEEK.

THEREFORE, MY CHARGE TO YOU IS TO FORMULATE RECOMMENDATIONS
AROUND THE FOLLOWING QUESTIONS:

1. HOW TO DEVELOP PARTNERSHIPS BETWEEN SELF-HELP GROUPS AND
THE HEALTH CARE DELIVERY SYSTEM THAT IMPROVE THE HEALTH
AND WELL-BEING OF THE PUBLIC
2. HOW TO EDUCATE THE PUBLIC AND HEALTH PROFESSIONALS ON
THE USE AND BENEFITS OF SELF-HELP GROUPS.
3. HOW TO USE RESEARCH TO EXPAND THE CURRENT KNOWLEDGE OF
THE WAY SELF-HELP GROUPS WORK, THEIR BENEFITS, AND THEIR
LIMITATIONS.

4. AND HOW TO START AND SUPPORT THE USE OF SELF-HELP GROUPS AS PART OF THE SYSTEM OF HEALTH CARE DELIVERY IN THIS COUNTRY.

I'M DELIGHTED THAT THIS WORKSHOP IS TAKING PLACE AND I'M PLEASED THAT THE PUBLIC HEALTH SERVICE HAS HELPED MAKE IT HAPPEN AND THAT A NUMBER OF MY P.H.S. COLLEAGUES ARE HERE, ALSO, TO LEARN AND TO SHARE.

I WANT TO CONGRATULATE THE PLANNING COMMITTEE FOR ITS GOOD SENSE...AND SENSITIVITY.

THE DYNAMIC AND INDEPENDENT NATURE OF PEOPLE IN THE SELF-HELP MOVEMENT DOES NOT NECESSARILY PROMOTE PEACE AND HARMONY IN THE DEVELOPMENTAL STAGES OF SUCH A MEETING.

BUT I THINK THE COMMITTEE CAME THROUGH THE CRUCIBLE OF THE PLANNING PROCESS WITH AN EVEN STRONGER COMMITMENT TO THE GOALS OF PARTNERSHIP.

AND I WANT TO ESPECIALLY RECOGNIZE MR. MARK MAYEDA AND HIS STAFF AT THE CALIFORNIA SELF-HELP CENTER AND MARILYN RUIZ AND ANNETTE NUSSBAUM FROM THE ILLINOIS SELF-HELP CENTER FOR THEIR SIGNIFICANT CONTRIBUTIONS TO THIS WORKSHOP.

THROUGHOUT THE MANY MONTHS LEADING UP TO THIS MOMENT, THEY HAVE TENDED TO THE DETAILS, YET NEVER LOST SIGHT OF THE OVERALL OBJECTIVE. AND ON TOP OF THAT, I THINK THEY'VE BEEN EXCELLENT HOSTS.

SO NOW...IT'S UP TO THE REST OF US.

OVER THE NEXT TWO DAYS, LET'S SHARE OUR HOPES...OUR KNOWLEDGE AND EXPERIENCE...OUR COURAGE...AND OUR LOVE FOR WHO WE ARE:

WE'RE PEOPLE WHO KNOW FULL WELL HOW IMPERFECT THE HUMAN RACE IS...BUT WHO ARE NEVERTHELESS DETERMINED TO MAKE IT BETTER.

DR. M. SCOTT PECK, IN HIS BOOK, THE DIFFERENT DRUM, SAYS...

"THERE CAN BE NO VULNERABILITY WITHOUT RISK, THERE CAN BE NO COMMUNITY WITHOUT VULNERABILITY; THERE CAN BE NO PEACE -- AND ULTIMATELY NO LIFE -- WITHOUT COMMUNITY."

GOD BLESS YOU...THANK YOU VERY MUCH...AND NOW, LET'S BEGIN.

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