

AIDS lecture January 19, 1987

Address

By

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Contrary to previous experience, this lecture in a public form was given only 4 days after the last word discussion, which had been in the form of testimony before the Senate Labor and Human Resources Committee.

This address would not have been given without the cooperation of Jerry Farwell, a minister of the gospel, often berated by the press, but who indeed, was one of the most understanding and far sighted members of the religious community in reference to AIDS. For example, he invited me to take his pulpit on the evening of January 18, 1987; my remarks are not recorded in this archive, although it was broadcast live on the southern television networks. He arranged for me to present this lecture here to the students at Liberty University, a part of his Christian ministry. I might say in passing, that some months after this lecture was given Jerry Farwell, misinformed by some of his colleagues, offered a book to his constituents, free of charge, on the transmission of AIDS. It was a terrible book with very little true information and an abundance of false information. I called Jerry Farwell from my car on the telephone – an unusual event in 1987 – and said, “Jerry, if you want to maintain scientific integrity and exercise proper stewardship over your extended flock, that book must be recalled and destroyed.” I’m delighted to say that in spite of the fact that it cost him a considerable amount of money and effort to do so, he did destroy as many copies of that book as was possible to find.

I closed this lecture with something that has to be said now and could be said in reference to each lecture I gave for the following year. What I have to say is a grim message, and that probably means that 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 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.

This lecture was presented to a college audience not by pulling punches, but by being sensitive to their concerns and the concerns of those who are acting for them in loco parentis. This lecture starts with history, some of which has been covered in the preliminary statements about this series of lectures in this archive, and a simple articulate message about the disease, a disease that is spreading, what little we know about the AIDS virus, and the low expectation on my part for an effective vaccine. We do know with complete certainty that the AIDS virus is transmitted from one person to another either in blood or in semen. It explains, for example, why 17 per cent of all AIDS cases are men and women who abuse drugs, sharing dirty intravenous paraphernalia that they have borrowed from another drug user who already has AIDS.

In this very early lecture, especially to college students probably more protected than most, it was necessary to explain in some detail about AIDS in reference to homosexual and bisexual men, which meant that some homosexual sex practices had to be rather explicitly described.

I also introduced the fact, not commonly reported elsewhere, that heterosexual activity seems to be the only risk factor in 4 per cent of people who are HIV positive. In this regard, I made my first prediction, which was that the increase in number of cases of AIDS would increase about nine-fold between then and the year 1991, but the number of AIDS cases involving heterosexual persons would increase about twenty-fold.

It was possible to report that over the past five years when we saw homosexual, and bisexual men as the key groups at risk, all our information we beamed virtually to them. These efforts were effective to some degree and things improved tremendously.

It was then possible to turn to two messages to be delivered to any male or female person, between the ages of twelve and eighty. The first is simple enough, "Find someone who is worthy of your respect and your love...give that person both...and stay faithful to him or her. I summarized much more explicit advice with the term monogamy. The second message is for people who don't yet have a faithful monogamous relationship and that message is, caution!

And then to those people who will not be abstinent and will not achieve a faithful monogamous relationship, I said the following:

- Don't have sex with someone who already has AIDS
- Don't have sex with who would likely carry the virus of AIDS – a person who for example practices any kind of risky behavior
- If you do decide to have sex with such an individual, a stupid decision that could have serious health consequences, then be sure that a condom is worn for sexual intercourse from start to finish.

My report was criticized when it was first published in October of 1986 as being too explicit, and I was under some pressure from some people in the White House to eliminate words such as penis, vagina, rectum, and condom. But you can't talk about a lethal disease like AIDS without talking about what causes high risk and as delicately as I could, I broached the subject of oral sex and suggested that it as well as sex with female or male prostitutes be avoided.

Something that was not frequently mentioned by the few who were talking about AIDS in those days was to stay clear of drugs and alcohol. Reason: these substances lower ones ability to think clearly and protect oneself from danger, especially the danger of having sex with an AIDS infected partner.

I reported that when I talked to adults about the AIDS problem and 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, and this introduced the whole subject of the need for sex education. I've always maintained that you cannot teach anyone about a lethal sexually transmitted disease until that person knows something about his or her own sexuality. I wanted that education to be factually correct, personally sensitive and morally strong.

Note that I did not use the term "sex education", because it immediately polarizes any audience. Also, sex education, as I understand it, is really much too limited in that it usually talks about class hours devoted to human reproductive biology, including carefully phrased explanations about the use and abuse of the male and female genitalia – or as the young people call these classes "organ recitals".

There are always sticklers who want to know when sex education should begin, and the answer is it should be begin at the right age, and that should be a developmental age, rather than a chronological age. I am particularly sensitive on this subject because when I presented the first report on AIDS to the American public I said these same things and was castigated by some segments of the public for so doing.

It has always been my thesis that the sex education of children must rest primarily with the parents. Strangely enough, they all agree with me, but sadly enough, very few of them do anything about it. When parents abrogate that privilege and obligation they should not be as opposed to sex education properly done in a sensitive way with a concept of love and responsibility by another source. This led to several pages in my speech on the development of children, the failure of parents to do their job, the fact that they can't have it both ways, no instruction at home and no instruction in school. I ended that section of my lecture with admonitions to parents which got me into the subject of privacy and biology. These are the two reasons why parents have such a hard time with "sex education". There is also a third reason, "sex education ought to deal with relationships between men and women who are loving, caring, respectful, and tolerant. Such relations include some fulfilling sexual activity, but they are not defined only by that activity. This led to some more discussion of balanced relationships in presently married couples that are rare and lead to further problems in transmitting this information to children.

I closed with reminding this college audience that sex information seems to reach children in three ways: guidance offered by parents, formal programs of some kind such as a school curriculum, but also from unstructured, unplanned experiences, especially the accumulation of sexual fact and myth from the media and from other children.

This led to reciting the research at Michigan State University about the large number of ninth and tenth grade girls that watch between one and two hours of soap-operas every afternoon depicting sexual intercourse between unmarried partners shown or discussed on an average of 1.56 times an hour. In the evening a larger number of ninth and tenth grade girls and boys watch three to

four hours of television. On those prime time evening shows acts of unmarried intercourse are shown or discussed on an average of once an hour.

Those same researchers found that over 60 – 70 percent of those same ninth and tenth graders had seen the top five R -rated films in which sexual intercourse between unmarried partners occurred on the average of eight times per film.

Children don't live in a vacuum; they live in the real world of pleasure and danger. We have some experience with it and some sense on how to survive in it with our lives and values intact, and I believe therefore, we have the responsibility to pass it on to our children.

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Abstinence  
AIDS information that everyone should know  
AIDS virus  
Authoritative sexual education.  
Condoms  
Developmental age vs. chronological age  
Effects of alcohol & drugs on decision-making  
Heterosexual activity and AIDS  
High-risk behavior  
Homosexual and bisexual men  
Human imperfection  
I.V. Drug Abuse and AIDS  
Improvement in homosexual behavior  
Lifesaving messages  
Life's negative experiences  
Likelihood of vaccine  
Marital fidelity  
Morality and public health  
Mutually faithful monogamy  
Oral sex  
Pneumocystis Carinii pneumonia  
Precautions of the choice of a sexual partner  
Predictions of the spread of AIDS by 1991  
Prime time television & sex  
Privacy and biology as barriers to parental teaching  
R-rated movies & sex  
Reaction of adults to high-risk behavioral practices  
Reaction of young people to high-risk behavioral practices  
Research on 9<sup>th</sup> and 10<sup>th</sup> graders  
Sensitive & affirmative human relationships  
Sex education  
Sex with prostitutes  
Soap operas & sex  
Social and spiritual development of children  
Statistics as of January 1986

The balance of emotional & intellectual factors in relationships

The ignorance of parents

The physical & sexual factors in relationships

The responsibility of parents

The source of information on sex in children

Transmission of AIDS

True love

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Acquired Immuno-Deficiency Syndrome

Michigan State University

“Organ recitals”

Public Health Service