

AIDS Lecture April 4, 1987

Address

By

C. Everett Koop, MD, ScD

Surgeon General

Of the

United Public Health Service

And

Deputy Assistant Secretary for Health

U.S. Department of Health and Human Services

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There were two lectures on my schedule for the same day in San Francisco on the day this was given and both of those were given nine days after the most recent lecture on AIDS. I had been invited to address the Annual Meeting of the National School Board Association and that was firmly set for late afternoon on the 4th of April. After those arrangements were made, I received an invitation from Deborah Walter, the Director of the Child Health and Development Program of the Scientists Institute for Public Information. The invitation was to take part in a seminar, but when they found that I had a previous commitment that would conflict with the end of that seminar, I delivered a lecture, which follows and I was out of that venue in time to make my appearance before the National School Boards later in the afternoon. The Scientists Institution for Public Information is an excellent one. It is an independent non-profit organization dedicated to improving public understanding of science, health, and technology issues. Through its core program the Media Resource Service, they access journalists to sources of information from their database of more than 20,000 science technology health and public policy experts.

In my experience, there is no city like San Francisco for its openness and curiosity. I spent a lot of time in San Francisco during 1987 and 88, and on two occasions when I was just sightseeing, someone – a passer-by – struck up a conversation with me about AIDS and soon I was talking to over 100 people gathered around recognizing who I was and what the subject was – one very important subject to the city of San Francisco. On one of these occasions, I was in the company of two of my adolescent granddaughters. I was pointed out with the crowd on the street near Fisherman's Wharf by the announcer in a passing sightseeing trolley bus.

There couldn't be a better audience for the message on AIDS than this one. I began by saying that there was so much misinterpretation about the facts about AIDS, that I wanted to quickly run through them, and I did. Much of what I said in that afternoon's lecture had been said just an hour earlier to the Annual Meeting of the Education Writer's Association. For the first time I made it clear that not one substantiated case had been reported of the virus being transmitted by coughing, sneezing ...by food utensils or water

glasses...by toilet seats and so on. Then for this audience especially important news that there was no scientific, medical or public health reason for barring or isolating a person with the virus from any routine school activity. Therefore, a decision to bar a child from school because he or she has tested positive for AIDS is not a public health decision. I went further and said that the audience may feel they may have to make such a decision and that it is wise and necessary to do so, but that decision may or may not be so. Purely on the grounds of public health it would not be a good decision at all.

I then went into how AIDS was really transmitted and for the first time said something I should have said earlier, but as I've said before it's frustration over the public's failure to grasp the message that leads to novel statements such as: "The rectum was not intended for sexual intercourse."

In reference to homosexuality, I repeated that we were fighting a disease not people and also stated it as I did earlier that afternoon; we are not at war with a lifestyle.

Also, for the first time I said "From whatever state... or territory or from whatever major city or small town – that the disease of AIDS is not longer 'possibly headed in your direction.'" It has probably already arrived.

I discussed the writing of the Surgeon General's Report and honed in on what I had to say about education and expanded upon it in reference to the education about one's own sexuality, and education about AIDS. I separated the role of states and communities from the role of the federal government. I talked about the guidelines set by CDC for teaching about AIDS in the nation's schools. I talked about the contributions of organizations such as National Congress of the P.T.A.s to the Surgeon General's Report. Then I said everything I'd already said ever before about AIDS education.

This gave me an opportunity to mention Dr. Otis Bowen, the Secretary of Health and Human Services, a family doctor, a former governor of Indiana, a tremendous gentleman, and a personal friend. He made it quite clear that his department perceives education as an activity that is "locally determined" and "consistent with parental values" expressed within each community. We had an overall education-planning document in the Public Health Service, which had a foreword in which Dr. Bowen expressly said: "Any health information developed by the federal government that will be used for education should encourage responsible sexual behavior – based on fidelity, commitment, and maturity, and placing sexuality within the context of marriage."

He went on to say that such information "provided by the Federal government" for schools "should teach that children should not engage in sex" and that such information "should be used with the consent and involvement of parents."

The Public Health Service also planned to establish cooperative agreements with state education departments and local school districts to support their efforts in mounting programs that teach about AIDS. The paperwork for that program was moving through the bureaucracy, even as I speaking

“The interesting thing about AIDS education is that this is an area where science and morality is walking the very same path. From a public health point of view, the best defense against AIDS is total abstinence. And that is certainly the message we should get across to our children.”

Because there was already talk in the press and on television of making condoms available for school children after a certain age, I went into the fact that condoms are recommended only if people don't take the good moral and public health messages we have delivered, but they are not 100 per cent protection.

For those in the audience who still felt that our young people were not unusually sexually active, I said for the first time in these lectures, that their ability to produce a million teenage pregnancies attests to that sexual activity without question.

Abandonment of infants by the mothers
Abstinence
AIDS
AIDS & misinformation, confusion, fear & anger
Admonitions for sexual behavior & clean needles
AIDS as a compounding factor in Black women
under age 19
AIDS as a compounding factor in high-risk
pregnancies
AIDS education
Ambivalence of male & female relationships in
general
Analogy between homosexual men & I.V. drug
abusers
Children born with AIDS
Child sexual abuse
Cross sexual transmission, the innocent victims of
the AIDS virus
Condoms
Divorce rate
Dysfunctional families
Economic & social stress in the Black community
Education as the primary weapon against AIDS
Heterosexuality
Homosexual & bisexual men
Inter-sexual & inter-generational chain of infection
Intravenous drug abusers
Mutually faithful monogamy
National Surgeon General's Workshop in Pediatric
AIDS (upcoming)
Parents as sex education teachers
Pneumocystis carinii pneumonia

Rape & attempted rape
Racial partition among babies born with AIDS
Research on sexual aggression against females by
college men
Sex education
Spouse abuse
Statistics of AIDS
Stigma of AIDS
Virus in body fluids

Kent State University
Dr. Mary Koss
National School Boards Association
Surgeon General's Report on AIDS