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J.P. Scott Lecture  
By  
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John Porter Scott had been a long-time friend and supporter in the Philadelphia pediatric community and was the quintessential gentlemanly pediatrician of yesteryear. He spent every morning making house calls on his pediatric patients at their homes in the western suburbs of Philadelphia and started his office practice in the small private practice section of the Children's Hospital about 1 pm in the afternoon until about 5 pm. I know from personal experience that he spent many of the hours between getting home in time for dinner and leaving after breakfast in consultation with worried mothers about their children.

I had, in a sense, come home to give this lecture – to the hospital that had been my home for 39 years. I talked about my career as a Surgeon General, even some background before that, and recited from the vantage point of eight years of service as Surgeon General a personal assessment of some of the things I thought I had done and accomplished.

It was known by Washingtonians particularly, but the rest of the country in general, that I came to Washington in 1981 with strong conservative support and lost a lot of that when I took the stand in the AIDS epidemic that we were fighting a disease and not the people who had it and especially when I got into the subject of sex education suggesting a precursor of an understanding of one's own sexuality if we were to teach children how to avoid contracting HIV. As I lost conservative political support, I gained not only liberal support, but that huge group of moderates in the center came to my side as well. It was said that I disappointed friends and surprised enemies, but I don't look at it that way. I think I walked the narrow road of truth in reference to what a public health official can say to the public about the promotion of health and the prevention of disease. In the process, a lot of people changed their minds about what they thought of me. I'd like to think that the educable part of our population understood what I was doing and rallied to my support, but many of those with money and power preferred to live with their prejudices.

The theme of this lecture is one I repeated in several venues in the transitional time from leaving my post as Surgeon General and entering the private sector where, for the next decade, I largely made my living as a lecturer to the public.