ADDRESS

BY

C. EVERETT KOOP, MD
SURGEON GENERAL

AND

DEPUTY ASSISTANT SECRETARY FOR HEALTH
U.S. PUBLIC HEALTH SERVICE
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

PRESENTED TO THE NATIONAL COALITION ON TELEVISION VIOLENCE
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I'M PLEASED TO BE YOUR KEYNOTE SPEAKER TODAY. AS YOU WELL KNOW, THIS TOPIC OF VIOLENCE ON TELEVISION IS AS MUCH A PART OF THE OFFICE OF SURGEON GENERAL AS THE FLAG AND THE UNIFORM. AND VIOLENCE IS EVERY BIT A PUBLIC HEALTH ISSUE FOR ME AND MY SUCCESSORS IN THIS CENTURY, AS SMALLPOX, TUBERCULOSIS, AND SYPHILLIS WERE FOR MY PREDECESSORS IN THE LAST TWO CENTURIES.

AND IT IS UNDERSTANDABLE, ESPECIALLY WHEN WE APPLY THE TERM "EPIDEMIC." AND I THINK IT IS FAIR TO DO THAT. VIOLENCE IN AMERICAN PUBLIC AND PRIVATE LIFE HAS INDEED ASSUMED THE PROPORTIONS OF AN EPIDEMIC. ASSAULTS...CHILD AND SPOUSE ABUSE...HOMICIDES AND SUICIDES AMONG YOUNG ADULTS...THESE INDICATORS OF VIOLENCE IN OUR POPULATION ARE STILL CLIMBING. THEY ARE OCCURRING AT A RATE "BEYOND WHAT IS NORMALLY EXPECTED." TO USE THE PHRASE USED BY EPIDEMIOLOGISTS TO DEFINE THE TERM "EPIDEMIC."

"THE OCCURRENCE OF A CASE OR CASES OF AN ILLNESS BEYOND WHAT WE MIGHT EXPECT, BASED UPON PAST EXPERIENCE, IS AN EPIDEMIC."
ONE OF THE BEST EXAMPLES OF THAT WOULD BE THE GREAT FLU EPIDEMIC OF THE WINTER OF 1980 AND '81. WE MIGHT HAVE EXPECTED SOMETHING ON THE ORDER OF 17,000 DEATHS FROM PNEUMONIA AND INFLUENZA DURING THAT 12-WEEK WINTER PERIOD. INSTEAD, THERE WAS A TOTAL OF 50,000 DEATHS, NEARLY TRIPLE THE EXPECTATION.

OF COURSE, PEOPLE DON'T "EXPECT" ANY OF THESE THINGS. WE DON'T LOOK FORWARD TO THEIR OCCURRING. AND WHILE SOME PEOPLE MAY BE UNFAMILIAR WITH THE SYMPTOMS OF CERTAIN DISEASES, I DON'T THINK THAT'S THE CASE WITH VIOLENCE. I WOULD GUESS THAT WE ALL KNOW WHAT VIOLENCE LOOKS LIKE.

AND WE DON'T LIKE WHAT WE SEE. WHenever AND WHEREVER IT OCCURS, IT SHOCKS AND FRIGHTENS US. AND WHEN IT OCCURS MORE OFTEN -- THAT IS, MORE FREQUENTLY THAN WE MIGHT EXPECT, BASED ON OUR PAST EXPERIENCE -- WE CONCLUDE THAT WE ARE IN THE MIDST OF AN EPIDEMIC OF VIOLENCE.

AND WE ARE.
VIOLENCE COMES IN MANY GUISES. BUT LET ME SPEAK OF JUST ONE: THE RATE OF MURDER AMONG YOUNG ADULT WHITE MALES, AGE 15 TO 24. THIS RATE, THE HOMICIDE RATE, WAS DOWN AROUND 3.7 DEATHS PER 100,000 POPULATION BACK IN 1950. TRANSLATED INTO TERMS OF THE REAL WORLD, THAT MEANS AN ESTIMATED 366 YOUNG WHITE MEN WERE MURDERED IN 1950.

OVER THE NEXT 15 YEARS THE HOMICIDE RATE CREPT UP, BUT VERY SLIGHTLY. THE HOMICIDE RATE AMONG YOUNG WHITE MEN IN 1965 HAD RISEN TO 4.9 DEATHS PER 100,000 POPULATION, OR A TOTAL OF ABOUT 740 DEATHS. THAT WAS TWICE THE 1950 FIGURE, BUT THEN THAT AGE GROUP ITSELF HAD GROWN ONE AND A HALF TIMES.

AN EPIDEMIC? WE DIDN'T THINK SO, AT THE TIME. THE ANNUAL INCIDENCE OF HOMICIDES AMONG WHITE MALES AGE 15 TO 24 WAS STILL WELL UNDER 1,000 AND THE RATE PER 100,000 POPULATION WAS CREEPING UP BUT VERY SLOWLY...STILL NOTHING TO BE SERIOUSLY ALARMED ABOUT. IT WAS NOT PLEASANT...IT WAS NOT COMFORTABLE...BUT IT WAS NOT TOTALLY UNANTICIPATED EITHER.
TODAY, THE SITUATION IS QUITE DIFFERENT. WE'VE GONE WELL BEYOND THAT THOUSAND-DEATH THRESHOLD. IN 1980 -- THE YEAR FOR WHICH WE HAVE THE LATEST DATA -- THE HOMICIDE RATE FOR THIS GROUP OF YOUNG MEN WAS 15.5 PER 100,000 POPULATION...THAT MEANS THE "BODY COUNT" HAD JUMPED TO 2,800 MURDERED YOUNG MEN.

COMAPRED TO THE YEAR 1965, THAT POPULATION GROUP OF YOUNG WHITE MALES GREW BY 17 PERCENT. BUT OVER THE SAME 15-YEAR PERIOD, 1965 TO 1980, THE TOTAL OF HOMICIDE VICTIMS IN THAT GROUP INCREASED BY 400 PERCENT. IN OTHER WORDS, MURDER IS NOW CLAIMING FOUR TIMES AS MANY YOUNG WHITE MEN AGE 15 TO 24 AS IT CLAIMED ONLY 15 YEARS AGO.

I THINK THAT'S A STARTLING FIGURE. IT IS PROOF ENOUGH THAT WE ARE NOT WITNESSING A PHENOMENON THAT "CAN BE EXPECTED." IT IS OBVIOUSLY WELL BEYOND ANY REASONABLE EXPECTATION. IT IS NOTHING LESS THAN AN EPIDEMIC OF MURDER...AN EPIDEMIC RAGING AMONG YOUNG MEN. BUT THAT'S NOT THE FULL PICTURE. THE SHARP RISE IN THE HOMICIDE RATE IS MIRRORED ELSEWHERE IN SOCIETY AS WELL:

$ THE SUICIDE RATE TODAY IS TRIPLE WHAT IT WAS IN 1950 AMONG YOUNG MEN, BOTH BLACK AND WHITE, AND YOUNG WHITE WOMEN.
The death rate for motor vehicle accidents has climbed to triple the homicide rate.

But all violence does not end only in death. Child abuse is a form of violence that usually does not end in physical death, but it may produce emotional and psychological death in the child.

The number of reported cases of child abuse has more than doubled over the past half-dozen years, from 416,000 cases in 1975 to 851,000 cases in 1981. The National Center for Child Abuse and Neglect, however, estimates there may be another million cases of child abuse and neglect not reported and not seen, known only to the family members involved and maybe a friend or neighbor. If the center is right, that would mean close to 2 million instances of child abuse and neglect occurring each year in our society. That is certainly beyond anything we might "reasonably expect."
SOME OF THESE STATISTICS ARE OPEN TO QUESTION BECAUSE OUR SYSTEMS OF REPORTING VIOLENT EPISODES ARE NOT WHAT THEY SHOULD BE. ASSISTANT ATTORNEY GENERAL LOIS HERRINGTON MENTIONED THIS PROBLEM IN THE OPENING PAGES OF THE REPORT BY THE PRESIDENT'S TASK FORCE ON VICTIMS OF CRIME:

"EVERY 23 MINUTES, SOMEONE IS MURDERED...EVERY SIX MINUTES A WOMAN IS RAPED. WHILE YOU READ THIS STATEMENT, TWO PEOPLE WILL BE ROBBED IN THIS COUNTRY AND TWO MORE WILL BE SHOT, STABBED, OR SERIOUSLY BEATEN. YET," SHE SAYS, "TO TRULY GRASP THE ENORMITY OF THE PROBLEM, THOSE FIGURES MUST BE DOUBLED, BECAUSE MORE THAN 50 PERCENT OF VIOLENT CRIME GOES UNREPORTED."

I THINK IT STILL MAY BE SAFE TO SAY THAT THE MAJORITY OF AMERICANS -- SO FAR, AT LEAST -- HAVE NEVER BEEN THE VICTIMS OF VIOLENCE. BUT NEARLY EVERYONE HAS WITNESSED VIOLENCE TAKE PLACE OR HAS SEEN ITS TERRIBLE RESULTS IN THE AFTERMATH. MAYBE WE KNOW PEOPLE WHO NO LONGER HAVE THE FULL FUNCTION OF ONE OR SEVERAL LIMBS -- AN ELBOW BROKEN OR A KNEE DISRUPTED...AN EYE LOST, A FACE DISFIGURED...A JAW BROKEN AND NOW IN RECURRENT PAIN...THE LOSS OF FULL HEARING.
THE REAL WORLD OF VIOLENCE IS A NIGHTMARE...ONE FROM WHICH A VICTIM MAY NEVER FULLY AWAKE. HOW DIFFERENT ALL THAT IS FROM THE FANTASY VIOLENCE ON TELEVISION. ON THE LITTLE SCREEN, ONE HUGE MAN WILL PHYSICALLY ASSAULT ANOTHER AND RUN AWAY. THE SECOND MAN, THE VICTIM, WILL REAPPEAR WITH A SMALL BANDAGE ON HIS FOREHEAD AND CONTINUE IN HOT PURSUIT OF HIS ATTACKER. BUT IN REAL LIFE, IT'S VERY, VERY DIFFERENT.

WERE A TYPICAL T.V. ASSAULT TO OCCUR IN REAL-LIFE, THE REAL VICTIM WOULD BE HOSPITALIZED...BE BANDAGED AND IMMOBILIZED...MAYBE HAVE A CAST ON ONE HAND AND WRIST, IF NOT ON BOTH...HAVE IMPAIRED EYESIGHT FROM MULTIPLE CONTUSIONS...MAYBE SUFFER FROM AN IMPAIRED SENSE OF BALANCE...AND BE IN NO SHAPE AT ALL TO PURSUE HIS ATTACKER FOR AT LEAST THE REST OF THE YEAR -- IF EVER.

I GUESS I'M MUCH MORE CONSCIOUS OF THIS DIFFERENCE BECAUSE I SPENT SO MANY YEARS IN SURGERY IN PHILADELPHIA. EVERY DAY I SAW THE HUMAN TOLL OF VIOLENCE...HIGHWAY VIOLENCE, VIOLENCE IN THE HOME, VIOLENCE AT THE WORKPLACE...PERSONAL, INDIVIDUAL, IRREPARABLE CATASTROPHES. AND YOU JUST NEVER GET USED TO IT AND HARDENED BY IT. I DON'T BELIEVE THAT AT ALL. EVERY NEW VICTIM YOU SEE IS A DIRECT CHALLENGE TO YOUR OWN SENSE OF HUMANITY. YOU CAN'T ALLOW YOURSELF TO TURN AWAY.
I think that is at the root of the government's concern with violence. I'd like to think so anyway. The government really should have no option but to be concerned, once it sees what the problem is. And the public health service first got a look at this problem over a dozen years ago.

You recall that it was Surgeon General Jesse Steinfeld who first took a look at the problem of television violence back in 1969. Then the National Institute of Mental Health turned out its first report in 1972 on violence on television. And ever since then, the U.S. Public Health Service and its Surgeons General have remained close to this issue.

I think Dr. Steinfeld and his colleagues were on the right track. I think his successors were, too. And I am ready to keep the fires of interest alive during my tenure as well. We know too much about the problem now to look the other way. It would be derelict for me or any of my successors to say, "It's over. There is no problem anymore."
CERTAINLY THE RESEARCH LEADS US TO QUITE A DIFFERENT CONCLUSION. AND HERE I AM SPEAKING OF THE RESEARCH SPONSORED BY N.I.M.H. WE'VE COME QUITE A DISTANCE SINCE 1972. I BELIEVE WE'VE PRODUCED A GOOD BODY OF RESEARCH ON THE SUBJECT. I KNOW THERE ARE STILL A GREAT MANY QUESTIONS THAT NEED TO BE ANSWERED. FOR EXAMPLE, WE OUGHT TO TAKE A MUCH CLOSER LOOK AT ALL OUR METHODOLOGIES TO SEE IF WE ARE TRULY APPLYING THE ONES THAT WILL YIELD THE MOST HELPFUL RESULTS TO PERSONS BOTH IN PUBLIC HEALTH AND IN TELEVISION.

I WILL STRESS THAT POINT BECAUSE I AM NOT AT ALL HAPPY AT THE ADVERSARIAL TONE THAT PERMEATES ALL OUR DISCUSSIONS BETWEEN THE MENTAL HEALTH COMMUNITY AND THE NETWORKS. THE REASONS FOR THE EXISTENCE OF SUCH AN UNPROFESSIONAL TONE ARE UNDERSTANDABLE...BUT THAT STILL DOESN'T GIVE ME ANY PEACE.

I'VE BEEN CONCERNED ABOUT THIS FOR SOME TIME AND I SUSPECT THAT ONE REASON FOR DIFFICULTY IS A PACKAGE OF MISCONCEPTIONS THAT EACH SIDE CARRIES WITH IT AT ALL TIMES. LET ME LIST A FEW OF THESE:
MISCONCEPTION NUMBER ONE: THE N.I.M.H. STUDIES ZERO IN ON THE POSSIBILITY OF TELEVISION HAVING A SERIOUS, ADVERSE EFFECT ON BEHAVIOR, ESPECIALLY THE BEHAVIOR OF CHILDREN, AND THAT THE CHIEF BEHAVIOR OF CONCERN IS VIOLENT BEHAVIOR...VIOLENCE AGAINST OTHERS, VIOLENCE AGAINST ONE'S SELF. BUT IT DOES NOT FOLLOW THAT SUCH STUDIES CAN BECOME THE BASIS FOR FURTHER REGULATION OF THE INDUSTRY.

REGULATION OF T.V. CONTENT IS A LEGITIMATE CONCERN FOR EVERYONE IN MEDIA. BUT IT IS VERY FAR OFF THE MARK HERE. THE RESEARCH CAN BE USEFUL -- AND I BELIEVE IT ALREADY HAS BEEN USEFUL -- TO BOTH THE T.V. INDUSTRY AND PUBLIC HEALTH PRACTITIONERS EVERYWHERE. BUT IT IS TRULY USELESS AS AN ARGUMENT FOR REGULATION. I THINK THAT IS A MISCONCEPTION AND FEAR THAT OUGHT TO BE AIRED OUT HERE AND THEN PUT TO REST.

MISCONCEPTION NUMBER TWO: THE T.V. INDUSTRY IS EXACTLY THAT...AN INDUSTRY FUNCTIONING WITHIN THE AMERICAN MARKETPLACE ECONOMY. AS SUCH, EACH NETWORK AND EACH STATION HAS CERTAIN RESPONSIBILITIES THAT ARE FUNDAMENTAL TO ANY BUSINESS OR INDUSTRY. OF COURSE, WE HOPE EVERY PRIVATE FOR-PROFIT ENTERPRISE CAN BE BOTH PROFITABLE AND SOCIALLY USEFUL. AND I WOULD HAVE TO SAY THAT ALL OUR MEDIA --
REGARDLESS OF THE ANXIETIES WE MAY HAVE ABOUT THEIR CONDUCT NOW AND THEN -- ALL OUR MEDIA HAVE DONE VERY WELL IN MAINTAINING THIS TOUCHY BALANCE BETWEEN PROFITABILITY AND SOCIAL UTILITY. STILL, MOST OF THEM DO.

MISCONCEPTION NUMBER THREE: WE MAY HAVE OUR DIFFERENCES OVER HOW TO DEFINE THE TERM "VIOLENCE," BUT SOMETIMES THERE IS UNANIMITY. SOME SHOWS WILL HAVE A SEGMENT THAT TEETERS ALONG THE EDGE OF WHAT CAN BE TOLERATED. AND PUBLIC HEALTH PEOPLE LEAP TO SOME MURKY JUDGMENTS ABOUT THE BROADCASTER'S MOTIVATION. THE REAL ISSUE, HOWEVER, IS THIS: WHY ON EARTH DOES ANYBODY WATCH THAT STUFF?

WE ARE UPSET WHEN ONE OR ANOTHER NETWORK BROADCASTS VIOLENT PROGRAMMING AND, IN DOING SO, GATHERS A LARGER "AUDIENCE SHARE." WHY A NETWORK WOULD BROADCAST THAT PROGRAM IS QUITE CLEAR: PRECISELY TO GET THAT LARGER "AUDIENCE SHARE." WE MAY BE UNCOMFORTABLE ABOUT IT, BUT WE WOULD HAVE TO ADMIT THAT THE DECISION MAKES SENSE FROM THE VIEWPOINT OF THE HEALTH OF THE NETWORK.

WHY THE AUDIENCE SWITCHES TO THAT CHANNEL TO WATCH IS NOT AS CLEAR. BUT WE CAN'T ANSWER THE SECOND QUESTION IF WE CONTINUE TO BE FRUSTRATED OVER THE FIRST.
WE MAY BE VERY UNHAPPY OVER THE FACT THAT MILLIONS OF PEOPLE -- INCLUDING THOUSANDS OF IMPRESSIONABLE CHILDREN -- WILL VOLUNTARILY WATCH SOMETHING THAT WE BELIEVE TO BE VIOLENT AND SOCIALLY HARMFUL. OUR JOB, IT SEEMS TO ME, IS TO RESEARCH FURTHER INTO THE MOTIVATIONS OF THE AUDIENCE, RATHER THAN TO CONTINUE POUNDING AWAY AT THE BROADCASTER.

I THINK AFTER ALL THESE YEARS, THE BROADCASTERS AND MENTAL HEALTH RESEARCHERS ARE EQUALLY SENSITIVE TO THE SOCIAL PROBLEMS CAUSED BY SOME POPULAR SHOWS. BUT REFUSING HENCEFORTH TO BROADCAST THOSE SHOWS COULD BE RUINOUS FOR A NETWORK. THAT'S TRUE...BUT WHY SHOULD THAT BE? WE NEED TO FIND OUT.

REFUSING TO BROADCAST SUCH SHOWS WOULD PROBABLY TRIGGER A LOUD COMPLAINT FROM THE VIEWING PUBLIC. I THINK THAT WOULD HAPPEN...BUT WHY SHOULD THAT BE? WE NEED TO FIND OUT.

REFUSING TO BROADCAST THEM WOULD PROBABLY CAUSE LARGE GROUPS OF VIEWERS TO SHIFT FROM THE "GOOD" CHANNEL TO ANOTHER THAT IS "NOT SO GOOD." I THINK THAT'S TRUE...BUT WHY SHOULD IT BE? WE NEED TO FIND OUT.
I believe we ought to be at that stage now when we no longer have to trade research studies like cannon volleys between Parklawn Drive in Rockville, Maryland, and Sixth Avenue, New York City. I happen to think that the N.I.M.H work is good. I also happen to think the network research is not as good. Honest people can differ about that. But at this stage, it is almost beside the point.

But that is not the end of our studies. Our work in television violence should serve to entice us further along the horizon of understanding. It would be appropriate for the many professions represented here today -- the medical, mental health, social science, political science, and public interest professions in particular -- to direct their resources toward finding answers to other, new, and far more disturbing questions.

Why do people experience fear in our society? We have enough anecdotal information to convince us that genuine fear of the environment is present among large numbers of the elderly, among children, among women, and among racial and ethnic minorities. Journalists, social service workers, and others who study contemporary life all feel this to be true. Why is this so?
DESpite an extensive 200-year-old body of American law to protect the weak and the innocent, Americans who are weak and innocent do not feel secure. They frequently identify themselves as victims in our society. This is a deeply disturbing aspect of contemporary life. We know very little about its origins and even less about a response.

We also are seeing more and more people withdraw from the real world to find sanctuary. That's very worrisome. Our society has not been built on a premise of fear and isolation among its members. On the contrary, we rely on the participation of all our peoples, not on their withdrawal.

The political and social health of this nation is endangered when any citizen feels unjustly threatened and withdraws in fear. But that's happening with greater frequency among vulnerable groups in our society. We need to know much, much more about this and how it is affecting the nature of American life.
ONE OF THE COMPLAINTS REGISTERED AGAINST TELEVISION IS ITS STEREOTYPED PORTRAYAL OF VICTIMS...THEY DO TEND TO BE CHILDREN, WOMEN, MINORITIES, OR OLD PEOPLE. IN THIS WAY, T.V. NOT ONLY MIRRORS REAL LIFE BUT TENDS TO REINFORCE THE VICTIM'S PERCEPTION OF LIFE AS A TERRIBLE ORDEAL.

THIS IS ESPECIALLY SADDENING TO SOMEONE LIKE MYSELF, WHO HAS TRAVELED A GREAT DEAL NOT ONLY AROUND THIS COUNTRY BUT OVERSEAS ALSO. IF YOU HAD BEEN ALONG WITH ME ON THESE TRIPS OVER THE PAST 35 TO 40 YEARS, YOU TOO WOULD HAVE SENSED THE GREAT WELLSPRINGS OF GENEROSITY THAT STILL EXIST AMONG THE AMERICAN PEOPLE. "WE GIVE." THAT'S MORE THAN A SLOGAN. IT'S AN ETHICAL IMPERATIVE OF THE AMERICAN PEOPLE.

AND WE HAVE OUR HEROES. SOME APPEAR WITH GREAT SUDDENNESS, LIKE LEONARD SKUTNIK, WHO DOVE INTO THE ICY POTOMAC TWO WINTERS AGO AND PULLED A DROWNING PERSON TO SAFETY. OTHERS HELP THEIR NEIGHBORS IN LESS DRAMATIC BUT NO LESS MEANINGFUL WAYS. AND WE CHERISH THEM FOR THEIR EXAMPLE.
AND, IN A COUNTRY LIKE OURS, WHERE GOVERNMENT AT EVERY LEVEL
STILL DELIVERS SO MANY HEALTH AND SOCIAL SERVICES, WE NEVERTHELESS
HAVE THE MOST ACTIVE AND SUCCESSFUL EXAMPLES OF PRIVATE CHARITY.

YET, WE ALSO SENSE THAT MANY MORE PEOPLE, UNTUCHED BY THE
GENEROSITY AROUND THEM, ARE GROWING MORE DETACHED...DISENGAGED...
AND DISCONNECTED. THEY ARE MUTE BYSTANDERS TO EVENTS. FOR THEM, AN
EVENING WITH THE T.V. SET IS THE BEST PROTECTION THEY CAN GET FROM
THE ENVIRONMENT OUTSIDE. WE HAVE BEEN REMINDED OF THIS PHENOMENON
IN OUR SOCIETY MANY TIMES, UNFORTUNATELY MORE OFTEN THAN WE HAVE
SEEN THE GIFTS OF THE LENNY SKUTNIKS OF THIS WORLD.

THIS DETACHMENT IS RELATIVE TO THE VIOLENT WORLD, IN THAT IT
EVEN HAS A NAME, A NAME THAT RECALLS A VICTIM...A CIRCUMSTANCE...A
CRIME...AND THE FAILURE OF A NEIGHBORHOOD THAT WAS DETACHED AND DID
NOT WANT TO "GET INVOLVED": IT'S CALLED THE "KITTY GENOVESE SYNDROME."
YOU MAY REMEMBER THAT INCIDENT. ON A COLD NIGHT IN MARCH OF 1964 MISS CATHERINE GENOVESE -- "KITTY" -- CAME HOME LATE FROM HER JOB AS MANAGER OF A NEIGHBORHOOD BAR IN HOLLIS, LONG ISLAND. SHE WAS ATTACKED 100 FEET FROM HER APARTMENT HOUSE IN KEW GARDENS. SHE SCREAMED FOR HELP, BUT NO ONE CAME.

DURING THE NEXT 35 MINUTES, 29-YEAR-OLD WINTON MOSELEY REPEATEDLY STABBED KITTY GENOVESE TO DEATH.

THIRTY-EIGHT OF MISS GENOVESE'S NEIGHBORS ADMITTED TO HEARING HER SCREAM, "OH, MY GOD, HE STABBED ME! PLEASE HELP ME! PLEASE HELP ME! I'M DYING!" SOME EVEN SAW THE MURDER TAKING PLACE. BUT NO ONE CAME TO HER AID. AND NO ONE CALLED THE POLICE UNTIL HER SCREAMS STOPPED AND SHE WAS DEAD...35 MINUTES AFTER HER FIRST LOUD SCREAM FOR HELP.

KITTY GENOVESE HAS BEEN DEAD FOR 20 YEARS, BUT THE CIRCUMSTANCES OF HER DEATH HAVE NOT BEEN FORGOTTEN. I DOUBT IF THEY EVER WILL BE. FIRST, IT WAS A FRIGHTENING REMINDER OF HOW FRAGILE IS OUR EXISTENCE TOGETHER. AND SECONDLY, EVERY YEAR BRINGS ITS OWN CROP OF NEW AND EQUALLY FRIGHTENING EVENTS.
JUST THIS PAST YEAR A YOUNG WOMAN WAS BRUTALLY RAPEd IN NEW BEDFORD, MASSACHUSETTS, WHILE OTHER MEN STOOD AROUND AND WATCHED. AND IN ST. LOUIS A YOUNG GIRL WAS RAPEd IN A PUBLIC FOUNTAIN WHILE ORDINARY PEOPLE WALKED BY UNCARING...EXCEPT FOR A LITTLE BOY WHO RACED AWAY ON A BICYCLE TO GET A POLICEMAN.

I'M SURE THERE IS NO ONE IN THIS ROOM WHO WOULD WANT TO HAVE BEEN AMONG THE BYSTANDERS IN KEW GARDENS IN 1964 OR IN NEW BEDFORD OR ST. LOUIS IN 1983 TO WITNESS THOSE ACTS OF CRIMINAL VIOLENCE. THOSE EVENTS STILL SEND COLD CHILLS THROUGH OUR HEARTS.

BUT VERY FEW OF US CAN SAY WITH ALL CANDOR AND SINCERITY THAT, HAD WE BEEN THERE, WE WOULD HAVE INTERVENED. MAYBE WE WOULD HAVE... THEN AGAIN, MAYBE NOT.

THE FACT IS...WE JUST DON'T KNOW. AND WHEN WE HAVE TO SAY -- "I HONESTLY DON'T KNOW WHAT I'D DO" -- THEN IT IS TIME THAT WE DIRECT MORE OF OUR RESOURCES TO ADDRESS THAT VERY DILEMMA...THE DILEMMA OF THE DETACHED BYSTANDER IN THE PRESENCE OF VIOLENCE. I'M SADDENED TO HAVE TO SAY THAT IT'S AN ESPECIALLY APPROPRIATE SUBJECT FOR SOCIAL SCIENCE RESEARCH IN THIS COUNTRY.
THAT'S A FAR MORE SIGNIFICANT ISSUE THAN WHETHER ONE OR ANOTHER TELEVISION SHOW PROMOTES VIOLENCE. I BELIEVE WE MUST CONFRONT THE HARD FACT THAT -- IF ALL THE TELEVISION STATIONS IN THIS COUNTRY WERE SHUT DOWN TOMORROW --

° MILIONS OF AMERICANS WOULD STILL BE FRIGHTENED OF THE LIFE AROUND THEM...

° HUNDREDS OF THOUSANDS WOULD BE VICTIMIZED AND NOT CARED FOR IN THE MOST COMPASSIONATE AND EFFECTIVE MANNER...

° AND MANY MILLIONS WOULD CONTINUE TO STAND ALOOF FROM THE PAIN OF THEIR NEIGHBORS, HOPING NOT TO "BECOME INVOLVED." THAT'S A VERY SERIOUS SITUATION AND WE NEED THE COURAGE TO GO TO WORK ON IT.

THIS COMING WINTER OF 1984 WILL MARK THE 20TH ANNIVERSARY OF THE DEATH OF KITTY GENOVESE. IN HER MEMORY, THE "CENTER FOR RESPONSIVE PSYCHOLOGY" AT BROOKLYN COLLEGE PLANS TO HOLD A SYMPOSIUM ON WHAT WE'VE LEARNED IN THE PAST 20 YEARS ABOUT Bystander BEHAVIOR AND VICTIM BEHAVIOR AND WHAT KINDS OF THINGS WE STILL NEED TO KNOW.
THERE IS STILL A GREAT DEAL OF INFORMATION WE NEED TO LEARN FROM BOTH THE PEOPLE WHO WITNESS ACTS OF VIOLENCE -- THE BYSTANDERS -- AND THE VICTIMS OF VIOLENCE THEMSELVES. HOW DO THEY PERCEIVE THE EVENT? HOW DOES IT REGISTER IN THEIR CONSCIOUSNESS? HOW DOES IT AFFECT THEIR LIVES?

WHAT MADE THE MEN OF NEW BEDFORD FEEL SAFE ENOUGH TO COMMIT RAPE IN A CROWDED POOL HALL? WE DON'T KNOW. BUT IT IS IMPERATIVE THAT WE TRY TO FIND OUT.

IN THE PUBLIC HEALTH SERVICE, WE ARE TAKING THESE QUESTIONS QUITE SERIOUSLY. WE'VE SET UP A "VIOLENCE EPIDEMIOLOGY BRANCH" IN OUR CENTERS FOR DISEASE CONTROL IN ATLANTA. IT'S A MULTI-DISCIPLINARY UNIT, WITH PERSONNEL FROM THE FIELDS OF PSYCHIATRY, MEDICAL ANTHROPOLOGY, CRIMINOLOGY, PUBLIC POLICY DEVELOPMENT, AND STATISTICS.

THE PROFESSIONALS IN THIS IMPORTANT BRANCH ARE POOLING THEIR INSIGHTS AND EXPERIENCES IN THE SEARCH FOR PATTERNS OF CIRCUMSTANCE... PATTERNS OF ACTION AND REACTION... FROM WHICH WE MIGHT DRAW SOME CONCLUSIONS ABOUT THE ETIOLOGY OF VIOLENCE AND WHAT SOCIETY MIGHT DO ABOUT IT.
IF THIS KIND OF EFFORT GENERATES GOOD INFORMATION IN THE NEXT FEW YEARS -- AND IF THE SAME THING HAPPENS ELSEWHERE AMONG PUBLIC HEALTH RESEARCHERS -- THEN MAYBE WE CAN HELP PEOPLE EXERCISE THEIR BETTER, MORE HUMANE, AND MORE COMPASSIONATE INSTINCTS, RATHER THAN LET THEM FALL VICTIM TO THE VIOLENT, ANTI-SOCIAL INSTINCTS OF A NEIGHBOR, A FRIEND, OR A PARENT.

IT IS IN OUR SOCIETY'S HIGHEST INTERESTS THAT WE ALL BE TRUTHFULLY SUPPORTIVE AND REASSURING...THAT WE UNDERSTAND HOW WE ALL NEED EACH OTHER...THAT WE CAN BE GOOD BOTH FOR AND TO EACH OTHER...AND THAT EACH OF US BE RESPONSIBLE FOR MAKING THESE NOTIONS A REALITY.

AT THIS STAGE, WE HAVE THE RHETORIC...BUT WE DON'T KNOW HOW TO GUARANTEE THAT THE RHETORIC WILL COME ALIVE AND HAPPEN.

WHEN WE DO...WHEN WE SEE THAT PEOPLE FEEL GOOD AGAIN ABOUT BEING RESPONSIBLE FOR ONE ANOTHER...THEN THE ISSUE OF VIOLENCE ON TELEVISION WILL BE ACADEMIC. CONFERENCES SUCH AS THIS ONE WILL NOT BE NEEDED. THE VIOLENCE THAT MAY REMAIN WILL HAVE FAR LESS OF AN EFFECT THAN IT NOW HAS.
LET ME CLOSE BY SAYING I DO NOT ENTIRELY DESPAIR OF THE TELEVISION INDUSTRY. IT'S AN EXTRAORDINARY MEDIUM AND, FOR MANY MILLIONS OF AMERICANS, IT IS THEIR BEST CONNECTION TO THE REST OF SOCIETY AND THE WORLD. AND MANY TIMES IN THE COURSE OF A BROADCAST DAY, AMERICAN T.V. WILL REVEAL ITS GOOD HUMOR, GENTLENESS, AND HUMAN CARING. WE DON'T WANT TO LOSE THAT EITHER.

AGAIN, LET ME THANK YOU FOR YOUR KIND INVITATION TO BE HERE TODAY. AND PLEASE ACCEPT MY BEST WISHES FOR A CANDID AND SUCCESSFUL CONFERENCE.

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