ADDRESS

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I'M DELIGHTED THAT I CAN MEET WITH YOU THIS AFTERNOON AND, LATER IN THE DAY, DROP IN ON THE ANNUAL MEETING OF THE NATIONAL SCHOOL BOARDS ASSOCIATION.

I SAY "I'M DELIGHTED" BECAUSE, NATURALLY, I WANT TO BE POLITE. EVERY GUEST SPEAKER SHOULD SAY THAT.

BUT IN YOUR CASE IT'S ALSO TRUE, BECAUSE THIS IS A TIME WHEN THE PUBLIC HEALTH DEPENDS ON THE PEOPLE OF OUR COUNTRY KNOWING THE FACTS ABOUT AIDS, A VERY VICIOUS AND LETHAL DISEASE.

THEY NEED TO KNOW HOW TO STEER CLEAR OF IT...AND THEY NEED TO KNOW HOW TO HELP OTHER PEOPLE STEER CLEAR OF IT, TOO.
AND WHAT BETTER INSTRUMENT DO WE HAVE FOR SUCH A TASK THAN THE INSTRUMENT OF A FREE PRESS.

OUR SOCIETY ALWAYS NEEDS A VIGOROUS AND WELL-INFORMED PRESS...WHETHER THE ISSUE IS TAXES, ARMS CONTROL, OR CITY HALL.

BUT SOMETIMES THE NEED IS ESPECIALLY CRITICAL. SUCH A TIME IS ALREADY UPON US...AND THE ISSUE IS AIDS.

THIS IS A TERRIBLE DISEASE, FOR WHICH WE DO NOT YET HAVE A CURE. NOR DO WE HAVE A VACCINE...AND PROBABLY WON'T HAVE ONE GENERALLY AVAILABLE BEFORE THE END OF THIS CENTURY.

SO, IF YOU'RE LOOKING AROUND FOR A LONG-RUNNING STORY, I'M AFRAID THIS IS IT.
THE ONLY THING WE HAVE THAT MAY WORK -- AND I REPEAT: "MAY WORK" -- IS EDUCATION...EDUCATION...AND MORE EDUCATION.

LET ME REVIEW JUST A FEW FACTS AND THEN GO ON TO SHARE WITH YOU A COUPLE OF VERY COMPLEX AND TROUBLING ISSUES.

YOU MAY HAVE HEARD SOME OF THESE THINGS ALREADY...BUT NOT IN QUITE THE SAME WAY.

FIRST OF ALL, THE AIDS EPIDEMIC IS ONLY 6 YEARS OLD. IF YOU CAN BELIEVE THAT. IT ALL BEGAN IN JUNE 1981, WHEN THE U.S. PUBLIC HEALTH SERVICE PUBLISHED THE FIRST 5 REPORTS OF PERSONS STRUCK DOWN BY PNEUMOCYSTIS CARINII PNEUMONIA.
THE 5 CASES WERE OF "OTHERWISE HEALTHY HOMOSEXUAL MALES" LIVING JUST DOWN THE COAST IN LOS ANGELES. THE CASES WERE CONSIDERED "CLINICALLY UNUSUAL." JUST HOW UNUSUAL IS NOW A MATTER OF HISTORY.

TODAY, THE TOTAL NUMBER OF AIDS CASES ON RECORD IS CLOSE TO 34,000. AND THE CURVE IS STILL GOING UP. ONE OR MORE CASES HAVE OCCURRED IN EVERY STATE, TERRITORY, AND THE DISTRICT OF COLUMBIA.

IN EACH OF 17 MAJOR CITIES THE COUNT HAS ALREADY TOPPED 300.
OVER HALF THE VICTIMS ON RECORD ARE ALREADY DEAD OF THE DISEASE...AND THE REST PROBABLY WILL BE. THE MORTALITY RATE FOR AIDS IS VIRTUALLY 100 PERCENT.

AIDS IS AN UNUSUAL VIRUS, IN THAT IT SEEMS TO CHANGE A LITTLE BIT, FROM HOST TO HOST. AIDS IS SPREAD IN A VERY PARTICULAR WAY. IT TENDS TO CONCENTRATE IN BODY FLUIDS WHICH ALSO CARRY LARGE CONCENTRATIONS OF INFECTED LYMPHOCYTES. THE TWO FLUIDS THAT SEEM TO WORK BEST ARE BLOOD AND SEMEN, IN WHICH LARGE NUMBERS OF VIRUS PARTICLES ARE INDEED FOUND.
IN OTHER BODY FLUIDS, SUCH AS TEARS, SALIVA, SWEAT, AND URINE, THE VIRUS PARTICLE COUNT IS TOO LOW OR IS ABSENT ALTOGETHER. HENCE, WE HAVE NO SUBSTANTIATED CASES OF THE AIDS VIRUS BEING TRANSMITTED IN WATER GLASSES OR ON TOILET SEATS OR BY SNEEZES AND COUGHS, AND SO ON.

AND THANK GOODNESS WE DON’T.

BUT UNFORTUNATELY, CERTAIN SEXUAL PRACTICES ENGAGED IN MAINLY BY HOMOSEXUALS AND BISEXUAL MEN OFTEN PRODUCE BOTH SEMEN AND BLOOD AND THESE FLUIDS ARE PASSED BETWEEN PARTNERS.
I'VE SAID MANY TIMES -- AND I'LL REPEAT IT AGAIN HERE -- THAT "WE'RE FIGHTING A DISEASE...NOT PEOPLE." WE'RE FIGHTING A VIRUS THAT HAS NOVEL BIOPHYSICAL CHARACTERISTICS AND REQUIREMENTS ...WE ARE NOT AT WAR WITH A LIFESTYLE.

NOW, I CAN TELL YOU THAT THIS IS MUCH EASIER FOR ME, TRAINED IN SCIENCE AND MEDICINE, TO EXPLAIN TO YOU THAN IT MAY BE FOR YOU -- AND YOUR READERS -- TO UNDERSTAND...AND ACCEPT.

THE AMERICAN PUBLIC TENDS NOT TO DEAL WITH ISSUES AND EVENTS IN AN ANALYTICAL, SCIENTIFIC MANNER...TO SAY THE LEAST. OF COURSE, THAT'S PART OF THE CHALLENGE -- AND PART OF THE FUN -- OF PUBLIC DEBATE IN A FREE SOCIETY.
BUT IN REFERENCE TO AIDS, OUR FREE-FORM TYPE OF PUBLIC DIALOGUE HAS ALSO BRED MISINFORMATION, CONFUSION, FEAR, AND ANGER. SOME MEMBERS OF THE PUBLIC GENUINELY MISTAKE A GIVEN LIFESTYLE AS BEING -- ITSELF -- THE CAUSE OF AIDS. BUT THERE'S NOT A SHRED OF SCIENTIFIC TRUTH TO THAT.

NEITHER HOMOSEXUALITY NOR HETEROSEXUALITY PER SE IS THE ISSUE.

IN FACT, AFTER SEVERAL YEARS OF INTENSIVE AIDS EDUCATION DIRECTED TO HOMOSEXUALS AND BISEXUAL MEN, IT APPEARS THAT THEY HAVE BECOME MORE CAUTIOUS IN THEIR SEXUAL PRACTICES AND, AS A RESULT, THE TRANSMISSION OF OTHER DISEASES LIKE SYPHYLLIS, GONORRHEA, AND HEPATITIS HAS, IN FACT, GONE DOWN. THEY HAVE A SHORTER INCUBATION PERIOD THAN AIDS DOES AND, HENCE, WE CAN TRACK THEM MORE EASILY FOR SHORT-TERM DATA.
WE CAN ONLY ASSUME -- AND I BELIEVE ASSUME CORRECTLY -- THAT THE TRANSMISSION OF AIDS HAS PROBABLY GONE DOWN, ALSO.

OF COURSE, THESE MEN REMAIN HOMOSEXUAL OR BISEXUAL AND THEY ARE STILL THE PERSONS MOST AT RISK OF CATCHING AIDS...AGAIN, NOT BECAUSE OF THEIR PARTICULAR SEXUAL ORIENTATION, BUT BECAUSE OF THE WAY THEY MAY PRACTICE WITHIN THAT ORIENTATION.

ODDLY ENOUGH, THAT'S EXACTLY THE SAME ISSUE IN REFERENCE TO INTRAVENOUS DRUG ABUSERS, WHO CONSTITUTE THE SECOND LARGEST GROUP OF AIDS VICTIMS.

THE ONES WHO USE THEIR OWN CLEAN NEEDLES FOR EACH "FIX" ARE KILLING THEMSELVES BY ABUSING POTENT, ADDICTIVE, ILLEGAL DRUGS, BUT THEY PROBABLY WON'T KILL THEMSELVES THROUGH AN AIDS-RELATED DISEASE.
BUT I.V. DRUG ABUSERS TEND NOT TO BE THIS FASTIDIOUSLY HYGIENIC. ON THE CONTRARY, ABOUT 90 PERCENT OF ALL HEROIN ADDICTS BORROW USED, DIRTY NEEDLES AND OTHER CONTAMINATED DRUG PARAPHERNALIA FROM OTHER ADDICTS.

IN OTHER WORDS, 9 OUT OF 10 DRUG ADDICTS ARE MAKING ABSOLUTELY SURE THAT THEY DIE AS EARLY AND AS UNCOMFORTABLY AS POSSIBLE.

AND WHEN THEY ENGAGE IN SEX, THEY'RE SHORTENING THE LIVES OF THOSE PEOPLE AS WELL.
PUTTING ASIDE THE PROBLEM OF HETEROSEXUAL TRANSMISSION FOR THE MOMENT, ONE COULD SAY THIS: IF EVERY HOMOSEXUAL AND BISEXUAL MAN USED A CONDOM DURING SEX FROM THIS DAY FORWARD...AND IF EVERY I.V. DRUG ABUSER USED ONLY A CLEAN NEEDLE FOR EACH "FIX," THE EPIDEMIC OF AIDS WOULD SLOW DOWN IN THOSE POPULATIONS...GRADUALLY REACH A STEADY STATE...AND FINALLY BEGIN TO RECEDE, AS THOSE WHO ARE ALREADY INFECTED DIE OFF AND AS NO NEW VICTIMS TAKE THEIR PLACE.

BUT THAT'S ONLY A THEORY. THE REALITY IS FAR MORE GRIM. SOME HOMOSEXUAL AND BISEXUAL MEN HAVE CHANGED THEIR SEXUAL PRACTICES...BUT NOT ALL OF THEM HAVE CHANGED.

AND WE HAVE NO IDEA AT ALL HOW MANY DRUG ADDICTS MAY HAVE HEARD OUR "CLEAN-NEEDLE" MESSAGE OF AIDS PREVENTION. NOR DO WE HAVE ANY IDEA OF HOW MANY ACTUALLY PROCESSED THAT INFORMATION AND, AS A RESULT, HAVE CHANGED THEIR BEHAVIOR. TRULY...NO IDEA AT ALL.
SO THE THEORY REMAINS JUST THAT: A THEORY. THE AIDS EPIDEMIC, IN REALITY, IS NOT GOING TO LEVEL OFF AND RECEDE FOR MANY, MANY YEARS TO COME.

BUT JUST HOW BAD WILL IT GET? HERE, AGAIN, WE HAVE SOME EDUCATED GUESSES, DEDUCTIONS MADE FROM THE AVAILABLE DATA. OUR PEOPLE AT THE CENTERS FOR DISEASE CONTROL, FOR EXAMPLE, ESTIMATE THAT THE TOTAL NUMBER OF REPORTED AIDS VICTIMS...NOW AT 34,000...MAY EXCEED 270,000 BY THE YEAR 1991.

AND THAT MIGHT NOT BE THE PEAK YEAR EITHER.

AND FINALLY, THE NUMBER OF COMPLETELY INNOCENT VICTIMS OF THE DISEASE HAS NOW BECOME STATISTICALLY SIGNIFICANT.
ABOUT 4 PERCENT OF ALL REPORTED AIDS VICTIMS ARE HETEROSEXUALS...MEN AND WOMEN WHO ARE NEITHER HOMOSEXUAL NOR BISEXUAL NOR I.V. DRUG ABUSERS. APPARENTLY THEIR ONLY HIGH-RISK ACTIVITY WAS TO HAVE HAD SEXUAL RELATIONS WITH SOMEONE ELSE WHO HAD AIDS.

A COMMON EXAMPLE COULD BE THAT OF A HETEROSEXUAL MAN WHO HAS SEX WITH AN AIDS-INFECTED PROSTITUTE, THEN GOES HOME AND HAS SEX WITH HIS UNSUSPECTING WIFE OR WITH OTHER WOMEN, ALL OF WHOM COULD RECEIVE THE VIRUS FROM HIM.

NOTHING VERY KINKY ABOUT IT...NOTHING VERY EXOTIC. BUT ALL VERY TRAGIC.

THE TRAGEDY IS THEN COMPOUNDED WHEN ONE OF THESE WOMEN BECOMES PREGNANT AND PASSES THE VIRUS ON TO HER NEW-BORN INFANT EITHER IN UTERO OR IN THE BIRTH CANAL DURING DELIVERY.

IT’S TRUE THAT THE NUMBER OF CHILDREN BORN WITH AIDS IS STILL QUITE SMALL. THEY CONSTITUTE JUST OVER 1 PERCENT OF THE TOTAL NUMBER OF ALL AIDS VICTIMS.
A COUPLE OF YEARS AGO, HOWEVER, THERE WEREN'T ANY. NOW THERE ARE 470. IN FACT, SOME HOSPITALS -- IN NEW YORK, NEW JERSEY, AND WASHINGTON, D.C., FOR EXAMPLE, -- HAVE HAD TO SET ASIDE ISOLATION WARDS TO TAKE CARE OF THE RISING NUMBER OF INFANTS INFECTED WITH THE AIDS VIRUS AND USUALLY ABANDONED BY THEIR MOTHERS.

I SHOULD ADD THAT, BECAUSE OF THE STIGMA OF AIDS, THERE ARE FAR FEWER FOSTER HOMES OPEN TO THESE CHILDREN. AND, IN FACT, THE STIGMA HAS BEEN AN INVISIBLE BUT VIRTUALLY IMPENETRABLE BARRIER BETWEEN THEM AND A WHOLE VARIETY OF SOCIAL AND PUBLIC HEALTH SERVICES.

THIS INTER-SEXUAL AND INTER-GENERATIONAL CHAIN OF INFECTION IS NOT A NEW STORY. IT'S THE SAME STORY WE IN PUBLIC HEALTH HAVE BEEN TELLING FOR YEARS IN REGARD TO THE TRANSMISSION OF HERPES, SYPHILIS, GONORRHEA, CHLAMYDIA, AND OTHER SEXUALLY TRANSMITTED DISEASES.
BUT AIDS HAS PUT A NEW TWIST ON THAT OLD STORY. THE AIDS INFECTION DOESN'T END WITH A SHOT OF AN ANTIBIOTIC.

IT ENDS IN DEATH.

I BEGAN MY REMARKS TODAY BY SAYING THAT I'D PASS ALONG SOME BASIC INFORMATION ABOUT THIS DISEASE AND THEN RAISE A COUPLE OF COMPLEX AND TROUBLING ISSUES FOR YOU TO THINK ABOUT ON THE PLANE-RIDE BACK HOME.

I THINK THESE ISSUES ARE OF EQUAL CONCERN TO BOTH MY OWN FIELD OF PUBLIC HEALTH ITSELF AS WELL AS TO YOURS OF EDUCATION.

THE FIRST ISSUE HAS TO DO WITH THE PROBLEM OF THE INNOCENT AIDS VICTIM...THE WIVES AND GIRLFRIENDS AND THE CHILDREN OF PERSONS INFECTED WITH AIDS.
OVER HALF THE BABIES BORN WITH AIDS ARE BLACK WITH ONE OR BOTH PARENTS CARRYING AIDS. ANOTHER 25 PERCENT OF ALL BABIES BORN WITH AIDS ARE HISPANIC.

WHAT WE’RE SEEING IN REFERENCE TO AIDS, THEREFORE, IS MORE TRAGIC EVIDENCE OF THE DEMOGRAPHY OF HIGH-RISK PREGNANCIES AND BIRTH. IN OUR SOCIETY, SUCH PREGNANCIES ARE MOST LIKELY TO OCCUR AMONG BLACK WOMEN UNDER THE AGE OF 19...WHO ARE POOR...WHO ARE NOT READY FOR THE WORLD OF WORK...WHO MAY NOT EVEN HAVE A HIGH SCHOOL DIPLOMA...AND WHO DO NOT HAVE READY ACCESS -- FOR WHATEVER REASONS -- TO GOOD PRENATAL AND PERINATAL HEALTH CARE.

THIS IS THE POPULATION OF YOUNG WOMEN WHO PRODUCE A DISPROPORTIONATE NUMBER OF LOW-BIRTH-WEIGHT BABIES...BABIES BORN WITH A DRUG HABIT...AND BABIES WITH FETAL ALCOHOL SYNDROME. LIFE FOR THESE BABIES IS A STRUGGLE FROM “DAY ONE”...AND MANY OF THEM NEVER MAKE IT TO “DAY TWO.”
THIS FACT IS IN ADDITION TO WHAT IS EMERGING WITH MORE AND
MORE CLARITY REGARDING THE INCIDENCE OF AIDS AMONG BLACK ADULTS.
IN THE POPULATION GENERALLY, 1 OF EVERY 8 AMERICANS IS BLACK...BUT
AMONG AMERICANS WITH AIDS, 1 OF EVERY 4 IS BLACK: 24 PERCENT OF
THE TOTAL CASES REPORTED SO FAR.

ALSO, ABOUT A THIRD OF ALL BLACK AIDS VICTIMS ARE I.V. DRUG
ABusers, WHICH IS ALSO DISPROPORTIONATE.

THIS IS ADDITIONAL CATASTROPHIC NEWS FOR THE BLACK COMMUNITY,
WHICH ALREADY IS UNDER GREAT ECONOMIC AND SOCIAL STRESS, AND IT'S
ALSO MORE EVIDENCE OF THE APPARENT INABILITY OF AMERICAN SOCIETY
IN GENERAL TO MAKE MUCH HEADWAY IN HELPING THESE YOUNG WOMEN
CONTROL THEIR OWN SEXUALITY AND THEIR OWN DESTINIES.
THE NUMBERS ARE NOT LARGE. BUT IF WE LOOK ONLY AT THE NUMBERS, WE'LL MISS THE TRUE MEANING OF WHAT'S GOING ON. AND I'M SPEAKING OF THE PROFOUND DYSFUNCTION OF FAMILY LIFE THAT IS TAKING PLACE AMONG A SIGNIFICANT NUMBER OF OUR FELLOW AMERICANS.

HERE, PEDIATRIC AIDS IS NOT ITSELF THE ISSUE...IT'S ANOTHER BUT A DEADLY SYMPTOM OF A LARGER ISSUE FACING SOCIETY AS A WHOLE.

IN A COUPLE OF DAYS I WILL BE IN PHILADELPHIA TO CONVENE A NATIONAL SURGEON GENERAL'S WORKSHOP ON PEDIATRIC AIDS. WE'LL BE DEALING WITH THE PROBLEM IN MUCH MORE DETAIL AT THAT TIME.
BUT I INTEND TO SAY TO THAT AUDIENCE, AS I’M SAYING TO THIS ONE, THESE CHILDREN ARE INNOCENT VICTIMS OF A DISEASE...AND OF A WEAKNESS WITHIN OUR SOCIETY GENERALLY, A WEAKNESS WHICH WE MUST CORRECT, IF WE TRULY CARE ABOUT IMPROVING MATERNAL AND CHILD HEALTH FOR EVERYONE IN THIS COUNTRY.

THE OTHER PROBLEM I WANT TO DISCUSS IS A PUBLIC HEALTH ISSUE...BUT IT’S ALSO MORE THAN THAT. LET ME GIVE YOU A LITTLE BACKGROUND FIRST.

OVER A YEAR AGO, PRESIDENT REAGAN ASKED ME TO PULL TOGETHER EVERYTHING WE KNEW ABOUT AIDS AND PUT IT DOWN IN A PLAIN-ENGLISH REPORT TO THE AMERICAN PEOPLE. IT TOOK ME 8 MONTHS, BUT I DID IT.
ONE OF THE CONCLUSIONS I REACHED WAS THIS: I SAID THAT, IN
THE ABSENCE OF A VACCINE OR ANY MIRACLE DRUG TO STOP AIDS, THE
BEST THING SOCIETY CAN DO TO CONTAIN THIS EPIDEMIC IS TO PRESENT
SCIENTIFICALLY ACCURATE AND PERSONALLY SENSITIVE INFORMATION ABOUT
AIDS TO OUR CHILDREN. BEFORE AIDS EDUCATION BEGINS, A CHILD
SHOULD BE GIVEN INFORMATION RELATIVE TO HIS OR HER OWN SEXUALITY.

I’VE RECOMMENDED THAT THIS BE DONE IN THE CONTEXT OF A
COMPREHENSIVE SCHOOL HEALTH CURRICULUM, SO THAT CHILDREN MAY MAKE
THE SAME KINDS OF INTELLIGENT, LIFE-SAVING CHOICES REGARDING THEIR
OWN SEXUALITY AS WE HOPE THEY WILL IN REGARD TO THEIR OWN DENTAL
HEALTH, THEIR ABILITY TO HANDLE ANGER AND STRESS, THEIR REJECTION
OF CIGARETTES AND OTHER DRUGS, AND SO.

INSTEAD OF CALLING IT “SEX EDUCATION,” I’D LIKE IT CALLED
SOMETHING LIKE STUDIES IN HUMAN DEVELOPMENT.
I think children should be learning all about themselves... about their unbelievable complexity, and especially about their own great value. If they are properly taught their own worth, we can expect them to treat themselves...and others...with great respect.

Human development instruction should keep pace with -- and not anticipate -- a child's own development and curiosity. It should begin in infancy, taught by parents with whom instruction and modelling go hand-in-hand.

And there are some basic concepts in human development that ought to be conveyed.

For example, I think children ought not to be afraid of sex. Still, I think it makes sense to suggest to them, as they approach pubescence, that abstinence at their time of life is by far the preferable option.

Abstinence, in fact, is the only option that really prevents the transmission of any sexual or venereal disease. But children grow up, and, as adults, not too many of them choose to be sexually abstinent all their lives. So what's next?
I’VE ADVISED THAT THE NEXT-BEST METHOD OF PROTECTION IS TO MAINTAIN A FAITHFUL, MONOGAMOUS RELATIONSHIP: ONE IN WHICH YOU HAVE ONLY ONE CONTINUING SEXUAL PARTNER...AND THAT PERSON IS JUST AS FAITHFUL AS YOU ARE.

TO PARAPHRASE MR. LEE IACOCCA, I SAY...

IF YOU HAVE A MONOGAMOUS RELATIONSHIP...KEEP IT.

IF YOU DON’T HAVE ONE...GET IT.

I THINK THAT’S GOOD ADVICE.
BUT, AGAIN, NOT EVERYONE IS FORTUNATE ENOUGH TO ACHIEVE SUCH A RELATIONSHIP. MANY MEN AND WOMEN WHO TAKE MARRIAGE VOWS MAY PRACTICE MONOGAMY. BUT NOT ALL OF THEM DO...AND SOME DO FOR ONLY A LITTLE WHILE, FIRST WITH ONE SPOUSE AND THEN ANOTHER. AS YOU KNOW, ABOUT HALF OF ALL MARRIAGES IN THIS COUNTRY END IN DIVORCE OR ANNULMENT, WITH A SUBSTANTIAL NUMBER OF THE INDIVIDUALS GOING ON TO TRY AGAIN.

SO, WHAT'S THE NEXT CONCEPT?

WHEN IN DOUBT, PROTECT YOURSELF. IF YOU DON'T KNOW WHAT YOU'RE DOING...AND WITH WHOM YOU'RE DOING IT...THEN DON'T DO IT. BUT IF YOU GO AHEAD ANYWAY, THEN YOU MUST BE ABSOLUTELY CERTAIN THAT YOUR PARTNER IS FREE OF THE AIDS VIRUS. OTHERWISE -- IF YOU'RE A MAN -- USE A CONDOM FROM START TO FINISH. IF YOU'RE A WOMAN -- MAKE SURE YOUR PARTNER USES A CONDOM FROM START TO FINISH.
A CONDOM IS NOT PERFECT -- I FRANKLY DON'T KNOW ANYTHING IN LIFE THAT IS -- BUT A CONDOM IS THE BEST THING AVAILABLE FOR PEOPLE WHO ARE NOT ABSTINENT AND DO NOT PRACTICE MONOGAMY.

THAT'S ESSENTIALLY MY MESSAGE ON SEX AND AIDS EDUCATION FOR CHILDREN AND YOUNG PEOPLE. IN MY REPORT OF LAST OCTOBER, I DEVOTED FEWER THAN 200 WORDS TO THE SUBJECT. BUT FOR SOME READERS, THOSE WERE 200 WORDS TOO MANY!

I COULD GO THROUGH A WHOLE SHOPPING-LIST OF ARGUMENTS AND COUNTER-ARGUMENTS ON THIS SUBJECT...BUT I WON'T. I'M SAVING THAT FOR LATER THIS AFTERNOON, WHEN I ADDRESS THE SCHOOL BOARD CONVENTION.
I'm sure that some of the discussion about sex and AIDS education reflects many genuine concerns by parents and school officials as to course content.

But I sense that much of the discussion also reflects the continued ambivalence and confusion in our society concerning male-female relationships in general.

There is more to human relationships than just "good sex" and young people ought to be told that. We should encourage them to seek out relationships that are sensitive and affirmative... equitable relationships in which both adults are mutually loving, caring, respectful, and considerate.
WE ALL WANT SUCH A RELATIONSHIP. BUT MANY PEOPLE SETTLE FOR MUCH LESS. THEY TEND TO OVER-EMPHASIZE SEX BECAUSE IT'S EASIER AND IT CAN BE ACCOMPLISHED WITH VERY LITTLE THOUGHT.

THIS IS THE DISTORTED MESSAGE THAT'S DELIVERED BY SO MUCH OF OUR POPULAR MEDIA AS WELL. IN THAT MEDIA MESSAGE, SEX IS MOST OFTEN A CASUAL AND EVEN GRATUITOUS ACT IN WHICH NO ONE GETS HURT ... NO ONE GETS PREGNANT ... AND NO ONE TAKES RESPONSIBILITY.

WHEN WAS THE LAST TIME YOU SAW AN R-RATED FILM IN WHICH THE FEMALE INGENUE CAME DOWN WITH GENITAL HERPES? OR WHEN WAS THE FIRST TIME, FOR THAT MATTER?
I suggest that we teach AIDS education at an appropriate moment within the context of a total sex education curriculum, but the issue we can't avoid is the nature of the larger context, that is, the social context that embraces sex education itself, and this is where we have to reach beyond the biology staff and secure the help of psychology and sociology staff as well.

The larger social context is the one in which men and women relate to each other generally in our society. And here the evidence is not very inspiring.

I've already mentioned our divorce rate.

I could talk about spouse abuse and child sexual abuse, which -- I'm sorry to report -- have surfaced to become serious public health issues for America.
AND JUST THE OTHER DAY I WAS BRIEFED ON A STUDY DONE FOR OUR NATIONAL INSTITUTE OF MENTAL HEALTH BY DR. MARY KOSS OF KENT STATE UNIVERSITY. IT INVOLVED A REPRESENTATIVE SAMPLE OF 6,000 MEN AND WOMEN WHO ATTEND 32 COLLEGES ACROSS THE COUNTRY. IT'S THE LARGEST SUCH STUDY THAT I KNOW ABOUT.

THESE SUBJECTS WERE, YOU MIGHT GUESS, REASONABLY WELL EDUCATED, MIDDLE-CLASS INDIVIDUALS FROM WORKADAY AMERICAN FAMILIES.

TWENTY-FIVE PERCENT OF THE COLLEGE MEN SAID THEY HAD COMMITTED SOME FORM OF SEXUAL AGGRESSION AGAINST A FEMALE COMPANION ONE OR MORE TIMES.
ABOUT 8 PERCENT OF THE SAMPLE HAD TRIED TO RAPE OR HAD RAPED THEIR COMPANIONS, AND HALF OF THESE SAID THAT, GIVEN THE CHANCE, THEY'D DO IT AGAIN.

TWENTY-FIVE PERCENT OF THIS REPRESENTATIVE SAMPLE COMES TO ABOUT 740 MEN. BUT 25 PERCENT OF THE TOTAL MALE ENROLLMENT IN AMERICAN HIGHER EDUCATION TODAY IS A MILLION-AND-A-HALF YOUNG MEN...A MILLION-AND-A-HALF YOUNG MEN FOR WHOM MALE-FEMALE RELATIONSHIPS ARE NOT CARING, NOT RESPECTFUL, CERTAINLY NOT LOVING, AND HARDLY EQUITABLE.

NEVERTHELESS, OUR JOB RIGHT NOW IS TO GET THROUGH TO THESE YOUNG MEN -- AND YOUNG WOMEN -- AND MANY MILLIONS MORE WHO ADOLESCENT AND PRE-ADOLESCENT AND ADVISE THEM...
FIRST, THAT THEY SHOULD BE ABSTINENT....

AND SECOND, IF NOT ABSTINENT, THEN MONOGAMOUS...

AND THIRD, IF NOT MONOGAMOUS, THEN AT LEAST SUPER-CAUTIOUS.

THIS IS NO ROSE GARDEN, BELIEVE ME. BUT WE'VE GOT TO MAKE THE EFFORT. THEIR LIVES ARE AT STAKE...AND SO IS THE PHYSICAL AND, YES, THE SPIRITUAL LIFE OF THIS COUNTRY.

WE MUST MAKE THE EFFORT TO EDUCATE AND INFORM THEM, EVEN THOUGH WE DO SO IN THE MIDST OF ALL THE OTHER COMPLEX ASPECTS OF SEXUAL RELATIONS IN AMERICA. AND SOME OF THESE ASPECTS -- SUCH AS FORCIBLE RAPE AND WIFE BATTERING -- ARE EVERY BIT AS LIFE-THREATENING AS AIDS ITSELF.
BUT WE MUST TRY.

WE MUST TELL YOUNG PEOPLE THE TRUTH ABOUT THIS DISEASE AND
ABOUT THE WAY IT’S SPREAD.

WE MUST TALK SENSE TO THEM...AND TO THEIR PARENTS...AND TO
THEIR TEACHERS.

AND I ASK EACH OF YOU: PLEASE HELP US DO THAT.

AND NOW, I THINK I HAVE A MOMENT FOR ONE OR TWO QUESTIONS
BEFORE I HAVE TO RUN.

THANK YOU.

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