SPIRIT OF MAN LECTURE

LOS ANGELES, CA

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GREETINGS, ETC.
IT IS AN HONOR FOR ME TO BE WITH YOU TODAY, TO JOIN THE RANKS OF THE DISTINGUISHED "SPIRIT OF MAN" LECTURERS. AS YOUR FORMER SURGEON GENERAL, A PUBLIC HEALTH OFFICER CONCERNED ABOUT THE WHOLE HEALTH OF THE WHOLE AMERICAN PEOPLE, I APPLAUD THE COMPREHENSIVE THEME OF THIS LECTURE SERIES.
OUR JUDEO-CHRISTIAN TRADITION VIEWS HUMAN BEINGS AS A
BEING A SOUL, POSSESSING A BODY AND HAVING
TRINITY, POSSESSING A BODY, A SOUL, AND A SPIRIT.

PHYSICIANS AND OTHER HEALTHCARE WORKERS KNOW WELL
THE BODY AND THE SOUL, BUT SOMETIMES THE SPIRIT OF MAN
SUFFERS FROM NEGLECT, FROM MALNUTRITION.

I AGREE WITH THE PSALMIST: "WE ARE FEARFULLY AND
WONDERFULLY MADE." WE NEED TO NOURISH AND EXERCISE
OUR ENTIRE BEINGS, BODY, SOUL, AND SPIRIT.
OFFER MY REMARKS TODAY IN THE SPIRIT OF CALDWELL ESSELSTYN, SHARING HIS ASPIRATION THAT SOCIETY'S MOST PRESSING MEDICAL CARE PROBLEMS WOULD BE ADDRESSED NOT ONLY BY OUR SCIENTIFIC EXPERTISE, BUT ALSO BY A NOBILITY OF SPIRIT.

TODAY I'D LIKE TO TALK TO YOU ABOUT SOMETHING THAT WE ALL ONCE WERE.... SOMETHING TO WHICH WE ALL LOOKED FORWARD....SOMETHING TO WHICH MANY OF US LOOK BACK WITH FOND MEMORIES....BUT SOMETHING WE DIDN'T LIKE ALL THAT MUCH AS IT HAPPENED.
I'd love to know what next that your individual minds as I said that. I suspect most of you guessed wrong. I wish to address that magical, necessary, troubled phase of life we call adolescence.
HISTORICALLY SPEAKING, ADOLESCENTS ARE A RATHER RECENT
INVENTION. OF COURSE, THERE HAVE ALWAYS BEEN PEOPLE IN
THE AGE BRACKET WHERE WE NOW FIND ADOLESCENTS --FROM
ABOUT TWELVE UNTIL THE EARLY TWENTIES-- BUT UNTIL
RECENTLY SOCIETY HAD A PLACE FOR ONLY TWO GROUPS:
CHILDREN AND ADULTS.
YOU WERE EITHER ONE OR THE OTHER. AND SOMETIMES THE
ADVERSITIES OF LIFE FORCED CHILDREN TO GROW UP VERY
FAST INDEED.
EVEN IF WE REPLACE THE TRADITIONAL ADULT/CHILD DIVISION 
OF SOCIETY BY A GENERATIONAL ONE, WE FIND NO ROOM FOR 
adolescents.

TWO WEEKS AGO WHEN I GAVE THE COMMENCEMENT ADDRESS 
at Vassar College, I looked beyond the young 
graduates seated before me, to the audience in which I 
was pleased to see a lot of grey heads. I said that I was 
delighted to see so many grandparents there, along 
with parents and children...... because most of us spend 
our lives in 3-generational worlds.
AS WE GO THROUGH LIFE WE CHANGE PLACES IN THAT 3-TO-GENERATIONAL WORLD. AND IT DOESN'T SEEM TAKE LONG FOR US TO GO FROM ONE GENERATION TO ANOTHER.

I TOLD THOSE YOUNG GRADUATES THAT IT SEEMED LIKE ONLY YESTERDAY WHEN I WAS RUNNING AROUND THE VASSAR CAMPUS AS A DARTMOUTH BOY, VISITING THE VASSAR GIRL WHO WOULD BECOME MY WIFE. NOW MY WIFE AND I HAD RETURNED, BOTH WITH GREY HAIR, BUT I WARNED THEM THAT IT WOULDN'T BE LONG — THEY WERE THE ONES WITH THE GREY HAIR.
I reminded the young graduates, those children, those young adults, those adolescents, that they must always remember that we all need the other two generations....and are needed by them.

But even in a three-generational view of society -- children, parents, grandparents-- it is hard to see where adolescents fit in.
Perhaps they began to carve a place for themselves at the beginning of this century, or as late as the 1920s, when compulsory secondary education stretched out their childhood, changed them, perhaps from children to youngsters.
BUT IT WASN’T UNTIL AFTER WORLD WAR II, ——THIS DEVELOPMENT WAS ARTIFICIALLY POSTPONED, FIRST BY THE GREAT DEPRESSION AND THEN BY THE SECOND WORLD WAR—— WHEN IN THE 1950S MORE AND MORE OF THESE YOUNGSTERS HAD DISPOSABLE INCOME, WHEN THEY WERE TARGETED BY ADVERTISERS, WHEN THEY BEGAN TO DEVELOPE THEIR OWN MUSIC, LIFE STYLES, AND ”YOUTH CULTURE”...IT WASN’T UNTIL THEN THAT WE BEGAN TO HEAR A LOT ABOUT TEENAGERS.
AND WE ALSO BEGAN TO HEAR ABOUT THE PARTICULAR PROBLEMS OF ADOLESCENCE.

SINCE THE CREATION OF A DISTINCT AGE —OR CULTURE— OF ADOLESCENCE WE HAVE SEEN TWO OTHER DEVELOPMENTS.

FIRST, A LENGTHENING OF THE ADOLESCENT PHASE OF LIFE, THROUGH ON ONE HAND THE CREATION OF MORE ADULT OPPORTUNITIES FOR SOME, THOSE WHO ATTEND COLLEGE AND EVEN GRADUATE SCHOOL FOR YEARS BEFORE ENTERING THE ADULT WORKFORCE,
AND, IRONICALLY, THROUGH THE ELIMINATION OF MORE ADULT OPPORTUNITIES FOR OTHERS, THE HIGH SCHOOL DROP-OUTS, LANGUISHING IN CHRONIC ADOLESCENT UNEMPLOYMENT.

SO, WE PRODUCE MORE AND MORE ADOLESCENTS, WE KEEP THEM IN THAT PHASE OF LIFE LONGER AND LONGER, BUT WE OFFER THEM LESS AND LESS, AND STILL DON'T KNOW WHERE THEY "FIT IN".
NOT REALLY A GENERATION, NOT REALLY A PART OF OTHER
GENERATIONS, THEY SUFFER FROM A STRANGE MIXTURE OF
INDULGENCE AND NEGLECT.

SOCIETY CRITICIZES ADOLESCENTS FOR HAVING NO
EXPECTATIONS, BUT THEN SOCIETY HAS NOT CONVEYED TO
THEM WHAT IT EXPECTS OF THEM.

THERE ARE MANY CRACKS IN OUR SOCIETY, AND ADOLESCENTS
ARE PRONE TO FALL THROUGH THEM.
ADDED TO ALL THESE PROBLEMS STEMMING FROM AN
UNCERTAIN PLACE IN OUR SOCIETY, MOST ADOLESCENTS, AT
ONE TIME OR ANOTHER, SUFFER REAL AND UNIQUE PROBLEMS IN
HEALTH.
I IMAGINE WE’VE ALL BEEN AROUND HOSPITALS ENOUGH, AS PATIENTS, VISITORS, OR HEALTHCARE WORKERS, TO HAVE OUR BLOOD RACE A LITTLE FASTER WHEN WE HEAR THE WORDS "CODE BLUE".

"CODE BLUE", TWO SHORT WORDS THAT MEAN THAT A LIFE IS ABOUT TO BE CUT SHORT.

"CODE BLUE" SIGNALS A LIFE-THREATENING SITUATION, AND SUMMONS ALL THE RIGHT PEOPLE TO THE RIGHT PLACE AT THE RIGHT TIME....TO SAVE THAT LIFE.
"CODE BLUE" IS THE PHRASE USED RECENTLY BY A NATIONAL COMMISSION ON ADOLESCENT HEALTH --ON WHICH I SERVE AS CHAIRMAN OF THE NATIONAL SAFE KIDS CAMPAIGN-- TO SIGNAL THE CURRENT CRISIS IN ADOLESCENT HEALTH.

"CODE BLUE" IS THE URGENT CRY WE MUST HEED TO MEET THIS DEBILITATING AND YET MOSTLY HIDDEN NATIONAL EMERGENCY.
THIS ENDANGERED AGE GROUP IS BUT A FEW YEARS FROM HAVING A PROFOUND RESPONSIBILITY FOR THE REST OF US, A PROFOUND IMPACT ON EACH OF US.

IN A FEW YEARS THEY WILL BECOME, NOT ONLY THE LEADERS OF THIS NATION, BUT ALSO THE PARENTS OF THE NEXT GENERATION, THE PARENTS OF THE NEXT WAVE OF ADOLESCENTS.

UNLESS WE RESPOND CORRECTLY TO THE CURRENT CRISIS IN ADOLESCENT HEALTH WITH COMPASSION, URGENCY AND SKILL, THE PROBLEMS FOR OUR SOCIETY WILL NOT ONLY ADD UP, THEY WILL MULTIPLY.
AT THE OUTSET WE NEED TO DISABUSE OURSELVES OF SOME COMMON MISCONCEPTIONS.

FIRST, WE MUST PUT ASIDE THE NOTION THAT ADOLESCENCE IS A TIME OF NATURAL GOOD HEALTH, A TIME WHEN CHILDREN BLOSSOM BEAUTIFULLY INTO YOUNG ADULTS, A TIME OF HIGH ENERGY AND WELL-BEING.
NOT TOO LONG AGO, ON ONE OF OUR MOST POPULAR TV PROGRAMS, THE BILL COSBY SHOW, THE FATHER, AN AGING TRACK STAR --LIKE COSBY HIMSELF WHO PLAYED THE ROLE-- JOKINGLY TOLD HIS WIFE HE HAD SEEN SOMETHING BEAUTIFUL. "WHAT WAS IT?" SHE ASKED. "NINETEEN," HE SAID..... HE HAD STOPPED TO WATCH A NINETEEN YEAR-OLD RUNNER SPRINTING AROUND THE TRACK, AND THAT CONJURED UP AN IMAGE OF PERFECT HEALTH AND ENERGY. THAT'S NOT THE WAY IT IS FOR MANY OF AMERICA'S NINETEEN YEAR-OLDS.
SECOND, WE MUST SET ASIDE THE ASSUMPTION THAT

adolescent health problems are limited to communities

plagued with high rates of crime and poverty.

No, it is in all communities, in every neighborhood

across the country, that we find problems affecting

adolescent health.
TRUE, MANY OF THESE PROBLEMS DO STEM FROM POVERTY.

BUT AFFLUENCE IS NO PROTECTION.

IN FACT, THERE ARE A HOST OF ADOLESCENT HEALTH PROBLEMS AFFLICTING THE CHILDREN OF AFFLUENCE, THE OVERLY-DRIVEN CHILDREN OF DEMANDING MIDDLE CLASS PARENTS: AFFLICTIONS LIKE ANOREXIA NERVOSA, BULIMIA, AND SIMILAR DISORDERS.
A GENERATION OR TWO AGO, THE CHIEF THREATS TO THE
HEALTH OF AMERICA’S ADOLESCENTS LAY IN THE VARIETY OF
INFECTIOUS DISEASES TO WHICH THEY MIGHT FALL VICTIM.
BUT AS MEDICAL SCIENCE HAS MADE GREAT STRIDES IN
ERADICATING OR CONTROLLING MANY OF THOSE INFECTIOUS
DISEASES, THE HEALTH OF OUR ADOLESCENTS HAS NOT SHOWN
THE EXPECTED IMPROVEMENT.
IN FACT, ADOLESCENTS ARE THE ONE GROUP OF AMERICAN SOCIETY WHOSE HEALTH HAS NOT SHOWN IMPROVEMENT OVER THE LAST 70 YEARS.

OUR CHALLENGE TODAY STEMS FROM THE NATURE OF THE ADOLESCENT HEALTH PROBLEMS. NO LONGER INFECTIONOUS OR OTHER "PHYSICAL DISEASES" LINGERING OUT THERE TO PREY UPON UNSUSPECTING AND INNOCENT VICTIMS, THE THREATS TO ADOLESCENT HEALTH Lie IN THE REALM OF BEHAVIORAL PROBLEMS.
IT IS WHAT ADOLESCENTS CHOOSE TO DO THAT BRINGS THEM TO THE HEALTH PROBLEMS THAT THEY SUFFER.

THE LIST IS ALL TOO FAMILIAR:

DRINKING, SMOKING, AIDS, PREGNANCY, SEXUALLY TRANSMITTED DISEASES, VIOLENCE, SUICIDE.

TRUE, SOME OF THESE PROBLEMS MAY TECHNICALLY OR LEGALLY HAVE A PHYSICAL OR BIOLOGICAL BASIS AND HENCE BE TERMED A DISEASE, BUT THEIR DANGER LIES IN THEIR LINK WITH ADOLESCENT BEHAVIOR.