ADDRESS

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MR. PRESIDENT, MR. SPEAKER... TO HOSTS, GUESTS, FRIENDS, ETC.)

IT IS AN HONOR AND A GREAT PRIVILEGE FOR ME TO ADDRESS THIS JOINT SESSION OF THE CALIFORNIA LEGISLATURE. AND WHILE YOUR INVITATION WAS ADDRESSED TO ME, I WAS PLEASED TO ACCEPT IT -- AND I AM HERE TODAY -- REPRESENTING NOT JUST MYSELF BUT ALSO THE PERSONNEL OF THE U.S. PUBLIC HEALTH SERVICE. I WANT VERY MUCH TO SHARE THE HONOR OF THIS MOMENT WITH THEM, BECAUSE SO MUCH OF WHAT I HAVE TO SAY IS THE PRODUCT OF THEIR HARD WORK.

ALSO, THE RELATIONSHIP BETWEEN LOCAL AND STATE PUBLIC HEALTH OFFICERS IN CALIFORNIA AND MY COLLEAGUES IN P.H.S. IS EXCELLENT. IT HAS BEEN OVER THE YEARS AND I'M SURE IT WILL CONTINUE TO BE.

THAT'S GOOD FOR CALIFORNIA...AND IT'S GOOD FOR THE COUNTRY.
THIS IS AN UNUSUAL EVENT...AN HISTORIC EVENT...AND I AM MOVED BY
THAT CONSIDERATION, ALSO. HOWEVER, AS I STAND IN THIS CHAMBER, I AM
MOST MINDFUL OF THE FOLLOWING...SINGLE...OVERWHELMING AND PROFOUNDLY
TRAGIC FACT:

THAT CALIFORNIANS WERE THE FIRST OF OUR CITIZENS, BACK IN JUNE OF
1981, TO BE IDENTIFIED AS BEING THE VICTIMS OF AIDS...THEY WERE
AMONG THE FIRST TO DIE OF THE DISEASE...AND BEFORE THE REST OF OUR
COUNTRY KNEW ABOUT -- OR TRULY UNDERSTOOD THE NATURE OF -- THIS
CATASTROPHE, THE PEOPLE OF CALIFORNIA WERE ALREADY BEGINNING TO
BURY THEIR DEAD.

I AM DEEPLY, DEEPLY SORRY THAT ANYONE -- HERE OR ANYWHERE IN THE WORLD
-- HAS HAD TO DIE OF THIS DISEASE. AND I AM ESPECIALLY SORRY THAT THE
PEOPLE OF THIS STATE HAVE HAD TO LIVE WITH THIS GRIEF THE LONGEST.
IT HASN'T BEEN 6 YEARS...YET, IT SEEMS LIKE AN ETERNITY...SINCE THOSE FIRST REPORTS CAME IN TO OUR CENTERS FOR DISEASE CONTROL IN ATLANTA. DURING THAT TIME...

WE'VE SEEN THE OFFENDING VIRUS AND WE'VE NAMED AND RENAMED IT...

WE'VE DEVELOPED A TEST TO DETERMINE IF THE VIRUS IS PRESENT IN SOMEONE'S BLOOD...

WE'VE BEEN ABLE TO GALVANIZE A LARGE, INTERNATIONAL ARMY OF BIOMEDICAL RESEARCHERS, AMONG WHOM, I MIGHT ADD, ARE MANY MEN AND WOMEN OF GENIUS WHO ARE WORKING ON THE PROBLEM IN LABORATORIES RIGHT HERE IN CALIFORNIA...

AND FINALLY, OVER THE PAST 6 YEARS WE'VE DEVELOPED A WAY OF MONITORING THE SPREAD OF THE DISEASE SO AS TO HAVE SOME REASONABLE BASIS UPON WHICH TO PLAN THE USE OF OUR RESOURCES TOMORROW AND FOR SOME YEARS IN THE FUTURE.
THAT LAST POINT IS A DIFFICULT ONE...ESPECIALLY FOR THE ELECTED REPRESENTATIVES OF A FREE PEOPLE. BUT WE KNOW THAT THE DISEASE OF AIDS -- AS IT CONTINUES TO SPREAD THROUGHOUT OUR POPULATION -- WILL BE DRAWING EVER MORE HEAVILY UPON OUR SOCIAL AND POLITICAL CAPITAL, AS WELL AS OUR MEDICAL AND FINANCIAL CAPITAL.

IT'S A DIFFICULT CHALLENGE FOR AMERICANS. BUT WE ARE A GOOD PEOPLE. THROUGH 200 YEARS OF OFTEN STORMY AND TUMULTUOUS HISTORY, THE PEOPLE OF THE UNITED STATES HAVE CLUNG TO THIS SOCIETY'S FUNDAMENTAL VALUES OF PERSONAL FREEDOM, MUTUAL ASSISTANCE, AND NATIONAL UNITY.

THOSE VALUES HAVE WITHSTOOD EVERY TEST. AND THEY ARE BEING TESTED AGAIN...RIGHT NOW...BY THE INFILTRATION OF THIS LETHAL DISEASE.

- BUT I FIRMLY BELIEVE THAT THOSE VALUES WILL ONCE MORE BE OUR GUIDES FOR COLLECTIVE ACTION AND ONCE MORE WE SHALL SURVIVE A GRAVE THREAT FROM THE OUTSIDE.
AND RIGHT HERE I MUST RECOGNIZE THE LEADERSHIP ALREADY DEMONSTRATED BY THE LEGISLATURE OF THE STATE OF CALIFORNIA, BY ITS GOVERNOR, GEORGE DEUKMEJIAN, AND BY THE RANK-AND-FILE PUBLIC HEALTH, MEDICAL, AND NURSING PERSONNEL THROUGHOUT THIS STATE. LIKE THE REST OF US, YOU’VE ONLY BEGUN WHAT APPEARS TO BE A LONG AND FEARFUL JOURNEY. BUT YOU’VE MADE A VERY COMMENDABLE START.

I’M THINKING IN PARTICULAR OF YOUR EARLY MOVES TO ESTABLISH MANDATORY REPORTING OF THE DISEASE AND A STATEWIDE REGISTRY OF CASES.

WITHIN A WEEK OF THE APPROVAL OF THE BLOOD TEST FOR AIDS, CALIFORNIA HAD ITS OWN EMERGENCY REGULATIONS IN PLACE TO PROTECT THE BLOOD SUPPLY. AND YOUR NETWORK OF ALTERNATIVE TEST SITES OUGHT TO BE A MODEL FOR EVERY OTHER STATE TO FOLLOW.

AND THROUGHOUT THIS TIME, YOU’VE BEEN VERY CAREFUL TO BUILD INTO THE LAW A RESPECT FOR CONFIDENTIALITY AND AN UNDERSTANDING OF THE OVERWHELMING BURDEN IT CAN BE FOR A PERSON TO LEARN THAT HE OR SHE HAS AIDS...AND WILL SOON DIE.
I'VE SAID IT MANY TIMES, THAT WE ARE FIGHTING A TERRIBLE DISEASE...WE ARE NOT FIGHTING THE PEOPLE WHO HAVE IT. AND BY YOUR ACTIONS, YOU HAVE MADE THE GOVERNMENT OF THIS STATE A STRONG ALLY IN THE CAMPAIGN TO MAKE SURE THAT AMERICANS KNOW AND RESPECT THE DIFFERENCE.

I THINK CALIFORNIA HAS DONE WELL IN THE WAY IT HAS EXPENDED ITS SOCIAL AND POLITICAL CAPITAL SO FAR ON THE ISSUE OF AIDS.

BUT IT'S ONLY BEEN A FEW YEARS...AND THIS DISEASE WILL BE SWIMMING AMONG US FOR THE REST OF THIS CENTURY AT LEAST.

WE NEED, THEREFORE, TO GIVE SOME THOUGHT TO THE WAY WE WILL CARE FOR THE RISING TOLL OF AIDS VICTIMS.
IT'S CONCEIVABLE THAT THE NUMBER OF BABIES BORN WITH AIDS MAY RISE. SOME WILL DIE WITHIN THE FIRST YEAR OR TWO OF LIFE. WE'RE SEEING THAT OCCUR ALREADY.

BUT OTHER CHILDREN WILL CARRY THE VIRUS AND MAY NOT EXHIBIT ANY SYMPTOMS OF AN AIDS-RELATED ILLNESS UNTIL THEY ARE WELL INTO THEIR SCHOOL YEARS.

FRANKLY, I DON'T THINK SOCIETY HAS YET WORKED OUT HOW IT WANTS TO RESPOND TO THE PLIGHT OF THESE INNOCENT YOUNG VICTIMS. SOME HAVE HAD TO TAKE THE BRUNT OF THE ANGER AND RESENTMENT DIRECTED AT THEIR PARENTS...WHO'VE BEEN BETTER ABLE TO STEP OUT OF THE WAY.

OTHERS HAVE HAD TO APPEAL...BY THEMSELVES...FOR MEDICAL AND SOCIAL SERVICES THAT WOULD HAVE BEEN ROUTINELY GIVEN CHILDREN WITH ANY OTHER DISEASE.
I do not believe that these examples will prove to be the rule. But the fact that they may have happened at all is reason enough for us all to feel some pain and contrition.

And the costs in dollars and cents is also going to mount. The federal contribution this year is $416 million. About $300 million of that is research...nearly $100 million is for public education and information...and about $10 million is for patient care.

As you well know, California by itself has spent nearly half the total dollars expended by all state governments on AIDS since 1983...some $56 million so far, apportioned among patient care, public information, and research.

Some of our experts estimate that, by 1991, the total national bill for the care of AIDS patients will be $16 billion a year...or nearly twice what we're spending this year to support all the programs of the entire U.S. Public Health Service.

How will we apportion those costs? What will be the federal government's share? What share is reasonable for the states to carry? And how much can we ask the individual and his or her family to pay?
COMMERCIAL INSURORS -- BOTH LIFE AND HEALTH -- HAVE RAISED QUESTIONS ABOUT COVERAGE FOR PERSONS KNOWN TO BE CARRYING THE AIDS VIRUS...OR WHO ARE MEMBERS OF ONE OR ANOTHER HIGH-RISK GROUP. WHILE WE CAN UNDERSTAND THEIR CONCERNS, FROM A STRICTLY FINANCIAL POINT OF VIEW, WE NEED TO ASK OURSELVES HOW THOSE CONCERNS FIT IN WITH GOOD PUBLIC POLICY IN GENERAL?

IN OTHER WORDS, WILL OUR DECISIONS REGARDING THE WAY WE PAY TO CARE FOR AIDS PATIENTS CONTAMINATE OUR ENTIRE SOCIAL AND POLITICAL DECISION-MAKING PROCESS ITSELF. WE MUST NOT ALLOW THAT TO HAPPEN. SUCH AN EFFECT ON OUR PUBLIC LIFE WOULD BE AN "AIDS-RELATED COMPLEX" EVERY BIT AS SERIOUS AS THE MORE RECOGNIZABLE A.R.C.'S LIKE PNEUMONIA AND CANCER.

THERE IS, OF COURSE, GENUINE ALARM THAT THE COSTS OF AIDS COULD MUSHROOM AND BANKRUPT OUR HEALTH CARE ECONOMY. MY ADVICE IS TO TAKE THE ISSUE SERIOUSLY, BUT DON'T BE FRIGHTENED INTO TAKING ACTION INCONSISTENT WITH AMERICAN VALUES.
IN ADDITION, WE MUST NOT LET FEAR SO PARALYZE US THAT WE FAIL TO DO CERTAIN SENSIBLE AND PRAGMATIC THINGS, SUCH AS DEVELOPING ALTERNATIVES TO THE HIGH-COST TERMINAL CARE THAT'S GIVEN AIDS PATIENTS IN OUR COMMUNITY AND GENERAL HOSPITALS.

IN ANY CASE, THE CENTRAL QUESTION BEFORE US TODAY...AS IT HAS BEEN FOR OVER 200 YEARS...IS STILL THIS:

HOW CAN WE LIVE SO THAT WE MAY BE A HUMAN AND CIVILIZED PEOPLE?

I CAN'T IMAGINE THIS COUNTRY EVER BECOMING FINANCIALLY BANKRUPT. BUT OUR SOCIETY -- LIKE EVERY OTHER SOCIETY IN HUMAN HISTORY -- ALWAYS RUNS THE RISK OF BECOMING MORALLY AND ETHICALLY BANKRUPT.

AND WE MUST NEVER LET THAT HAPPEN.

ORDINARILY, THE SURGEON GENERAL OF THE UNITED STATES DOESN'T WORRY ABOUT SUCH THINGS. HE OR SHE MAY BE A MORAL AND AN ETHICAL PERSON -- AND CERTAINLY EACH OF MY PREDECESSORS WAS THAT KIND OF PERSON AND I HOPE I WILL BE JUDGED TO HAVE BEEN ONE, ALSO -- BUT YOU KNOW IT'S NEVER BEEN A REQUIREMENT, AS SUCH, FOR HOLDING THIS JOB.
BUT SOME THINGS HAVE APPEARED ON MY WATCH AS YOUR SURGEON GENERAL
THAT HAVE TESTED NOT ONLY MY UNDERSTANDING OF MEDICINE AND HEALTH...
BUT ALSO MY UNDERSTANDING OF THE NATURE OF THE AMERICAN PEOPLE.

OVER THE PAST 5 YEARS I’VE HAD TO WRESTLE WITH THE ETHICAL ISSUES
RAISED BY “BABY DOE” AND “BABY FAE”...BY LITTLE KATIE BECKETT...BY OUR
ABILITY TO TRANSPLANT ORGANS AND PROLONG LIFE FOR THE TERMINALLY ILL.

PEOPLE SAY, “WELL, DR. KOOP, AS THE SURGEON GENERAL...WHAT DO YOU
THINK ABOUT THAT?”

SOME OF MY FRIENDS IN WASHINGTON NOW ADVISE ME THAT, GIVEN A FEW
MORE TOUGH QUESTIONS LIKE THAT, AND I’LL BE JUST ABOUT READY TO RUN
FOR ELECTIVE OFFICE.

(I HONESTLY DON’T KNOW HOW YOU DO IT.)
MY LATEST CHALLENGE WAS GIVEN TO ME A YEAR AGO, IN FEBRUARY 1986, WHEN PRESIDENT REAGAN ASKED ME TO GATHER TOGETHER ALL THE INFORMATION ON AIDS THAT WAS THEN AVAILABLE AND PUT IT INTO A PLAIN-ENGLISH REPORT TO THE AMERICAN PEOPLE.

AND THAT’S WHAT I DID FOR THE NEXT 8 MONTHS. IN THE PROCESS, I MET NOT ONLY WITH DOCTORS AND NURSES AND PUBLIC HEALTH PEOPLE, I ALSO ME WITH REPRESENTATIVES OF CONCERNED GROUPS FROM ACROSS THE SPECTRUM OF SOCIETY...

GROUPS LIKE THE NATIONAL EDUCATION ASSOCIATION AND THE NATIONAL P.T.A....

THE NATIONAL COUNCIL OF CHURCHES AND THE CHRISTIAN LIFE COMMISSION OF THE SOUTHERN BAPTIST CONVENTION...
THE SYNAGOGUE COUNCIL OF AMERICA AND THE NATIONAL CONFERENCE OF CATHOLIC BISHOPS...

THE NATIONAL COALITION OF BLACK AND LESBIAN GAYS AND THE WASHINGTON BUSINESS GROUP ON HEALTH.

I TALKED WITH THE REPRESENTATIVES OF 26 GROUPS IN ALL. MOST OF THEM KNEW QUITE A BIT ABOUT THE HEALTH THREAT POSED BY AIDS. BUT WHAT THEY WERE DEEPLY TROUBLE ABOUT WERE THE MORAL AND ETHICAL ISSUES RAISED BY THIS DISEASE.

YES, WE ALL AGREED THAT THE ONLY REAL WEAPON WE HAD TO FIGHT WITH AT THIS TIME -- SINCE WE LACKED A VACCINE OR AN EFFECTIVE DRUG -- WAS THE WEAPON OF EDUCATION.

THAT'S WHERE WE ALL AGREED. WHERE WE HAD SOME DIFFERENCES OF OPINION, WAS THE SUBSTANCE AND THE DIRECTION OF THAT EDUCATION.
EVERYBODY HAD SAID, YES, WE SHOULD TEACH ABOUT THE DANGERS POSED BY THE AIDS VIRUS.

MOST PEOPLE SAID, WELL, MAYBE WE SHOULD TEACH ABOUT THE METHODS BY WHICH AIDS IS TRANSMITTED.

AND QUITE A FEW PEOPLE SAID THAT, OF COURSE, WE MIGHT POSSIBLY TEACH YOUNG PEOPLE SOMETHING ABOUT THEIR SEXUALITY TO BEGIN WITH.

I LISTENED TO EVERYBODY AND TOOK VERY GOOD NOTES.

YOU MAY RECALL THAT MY ENTIRE REPORT IS NOT VERY LONG. AND I ONLY DEVOTED 92 WORDS TO THE TOPIC OF EDUCATION. BUT THOSE 92 WORDS HAVE CAPTURED MOST OF THE ATTENTION OF THE MEDIA, OF PARENTS, OF EDUCATORS, AND OF PUBLIC OFFICIALS AT ALL LEVEL OF GOVERNMENT.

THE REASON IS CLEAR ENOUGH: THE ISSUE GOES TO THE HEART OF EACH PERSON'S OWN SYSTEM OF MORAL AND ETHICAL VALUES...OR LACK THEREOF.
I introduced the subject in a straightforward way. I said in my report that...

"Education about AIDS should start in early elementary school and and at home so that children can grow up knowing the behavior to avoid to protect themselves from exposure to the AIDS virus. The threat of AIDS can provide an opportunity for parents to instill in their children their own moral and ethical standards."

Some people were unduly alarmed by that phrase, "early elementary school." Would that include kindergarten? I'm afraid so.

I know of good, caring approaches to sex education that can be used -- and in fact are used -- in kindergarten and first grade.

However, I recognize that it's more difficult to do and, therefore, I would be willing today, some 4 months after publication, to make that single change in the report...that is, I would agree, albeit reluctantly, to take out the word "early" and just let the sentence read..."Education about AIDS should start in elementary school."
I concluded the report with exactly the same thought. I said...

"Education concerning AIDS must start at the lowest grade possible as part of any health and hygiene program... There is now no doubt that we need sex education in schools and that it must include information on heterosexual and homosexual relationships. The threat of AIDS should be sufficient to permit a sex education curriculum with a heavy emphasis on prevention of AIDS and other sexually transmitted diseases."

And I would not change any of the words in that paragraph.

I am aware that the people of California, through their educational organizations, health organizations, and through their representatives in local and state government, have endorsed the need to begin teaching about AIDS no later than the 7th grade.
I THINK THEY'RE ABSOLUTELY RIGHT AND I APPLAUD THEM FOR BEING CLEAR-HEADED AND PUBLIC-MINDED ON THE ISSUE.

I KNOW, ALSO, THAT MANY SCHOOL DISTRICTS IN THIS STATE HAVE ADOPTED ONE OR ANOTHER CURRICULM ELEMENTS THAT INTRODUCE HUMAN SEXUALITY AND REPRODUCTIVE HEALTH IN A POSITIVE AND CARING WAY TO CHILDREN IN ELEMENTARY GRADES -- GENERALLY SPEAKING THE 5th OR 6th GRADES.

AND BY THE WAY, THE SCHOOL HEALTH TASK FORCE FOR LOS ANGELES COUNTY CAME TO THE SAME CONCLUSION IN JANUARY 1986, A GOOD 10 MONTHS BEFORE MY OWN REPORT WAS PUBLISHED. IN THEIR REPORT, THE TASK FORCE MEMBERS RECOMMENDED THE GENERAL ADOPTION OF A COMPREHENSIVE SCHOOL HEALTH EDUCATION CURRICULUM THAT ROUTINELY INCLUDED SEXUALITY RIGHT ALONG WITH ACCIDENT PREVENTION, NUTRITION, AND AN UNDERSTANDING OF THE CARDIOVASCULAR AND GASTROINTESTINAL SYSTEMS.
IT'S AN EMINENTLY SENSIBLE RECOMMENDATION. AND IT IS AN ETHICALLY POSITIVE RECOMMENDATION AS WELL. IF WE ADULTS KNOW SOMETHING THAT COULD SAVE THE LIFE OF A CHILD, THEN CHILDREN HAVE A RIGHT TO THAT INFORMATION. AND WE HAVE THE OBLIGATION TO TELL THEM.

IF IT MAKES US UNCOMFORTABLE...IF IT IS AWKWARD TO DO...IF IT APPEARS TO CONFLICT WITH OTHER INFORMATION WE MIGHT HAVE, THOSE ARE PROBLEMS THAT WE HAVE TO RESOLVE IN A WAY THAT ENABLES US TO NEVERTHELESS TELL OUR CHILDREN WHAT THEY NEED TO KNOW AND HAVE A RIGHT TO KNOW.

I'M NOT SAYING IT'S EASY. BUT IT'S FAR FROM IMPOSSIBLE.

FOR EXAMPLE, I GAVE JUST THESE TWO PRECAUTIONS IN MY REPORT. THE FIRST ONE IS SIMPLE ENOUGH. IT ADVISES YOU TO...

FIND SOMEONE WHO IS WORTHY OF YOUR RESPECT AND YOUR LOVE...GIVE THAT PERSON BOTH...AND STAY FAITHFUL TO HIM OR HER.
IN OTHER WORDS, SHORT OF TOTAL ABSTINENCE, THE BEST DEFENSE AGAINST AIDS IS TO MAINTAIN A FAITHFUL, MONOGAMOUS RELATIONSHIP IN WHICH YOU HAVE ONLY ONE CONTINUING SEXUAL PARTNER...AND THAT PERSON IS AS FAITHFUL AS YOU ARE.

MY SECOND MESSAGE IS FOR PEOPLE WHO DON’T YET HAVE A FAITHFUL MONOGAMOUS RELATIONSHIP FOR WHATEVER REASON. THAT MESSAGE IS...

CAUTION: IT’S IMPORTANT THAT YOU KNOW WITH ABSOLUTE CERTAINTY THAT NEITHER YOU NOR YOUR PARTNER IS CARRYING THE AIDS VIRUS. IF YOU’RE NOT ABSOLUTELY CERTAIN, THEN YOU MUST TAKE PRECAUTIONS. AND THE BEST ONE AVAILABLE -- THOUGH FAR FROM PERFECT -- IS TO USE A CONDOM FROM START TO FINISH.
FROM MY VIEWPOINT, AS A PUBLIC HEALTH OFFICER, I TELL PEOPLE THAT WHEN THEY HAVE SEX WITH SOMEONE, THEY’RE ALSO HAVING SEX WITH EVERYONE ELSE WITH WHOM THAT PERSON HAS EVER HAD SEX. NATURALLY, IF THE “EVERYONE ELSE” IS ONLY YOU...YOU’RE VERY WELL PROTECTED FROM DISEASE ...AND FROM A LOT OF OTHER UNPLEASANT SURPRISES AS WELL.

THIS ALL SEEMS TO BE INFORMATION THAT IS CLEAR ENOUGH AND STRAIGHTFORWARD ENOUGH TO TELL CHILDREN. THERE’S NOTHING TERRIBLY ESOTERIC ABOUT IT. YET, MANY ADULTS -- PARENTS AND TEACHERS ALIKE -- ARE HAVING TROUBLE COMING TO TERMS WITH IT ALL.

THE MORE I’VE THOUGHT ABOUT THIS PHENOMENON, THE MORE I’VE COME TO BELIEVE THAT THE DIFFICULTY IS NOT IN THE FACT THEMSELVES CONCERNING SEXUALITY, HUMAN REPRODUCTION, AND AIDS. THE DIFFICULTY IS IN THE SIGNIFICANCE OF THOSE FACTS RELATIVE TO THE TOTALITY OF A SENSITIVE AND AFFIRMATIVE HUMAN RELATIONSHIP.
SUCH A RELATIONSHIP WILL INCLUDE SOME FULFILLING SEXUAL ACTIVITY, BUT IT IS NOT DEFINED ONLY BY THAT ACTIVITY. THERE'S MUCH MORE TO A LOVING, CARING, RESPECTFUL, AND TOLERANT HUMAN RELATIONSHIP THAN JUST "GOOD SEX." A RELATIONSHIP DEVOID OF LOVE AND RESPONSIBILITY IS LIKE A PIECE OF PIE THAT'S ALL CRUST AND NO FILLING. AND YOUNG PEOPLE OUGHT TO BE ADVISED OF THAT.

NOVELISTS CALL IT "TRUE LOVE." SOCIOLOGISTS CALL IT "MARITAL FIDELITY." THE SURGEON GENERAL CALLS IT "MONOGAMY." BUT WHATEVER YOU CALL IT, WE ALL WANT THAT WELL-ROUNDED, BALANCED, LOVING, AND FULLY CONSIDERATE RELATIONSHIP...A RELATIONSHIP THAT'S ENRICHED BY SEX, NOT OVERWHELMED BY IT OR DEVOID OF IT EITHER.

SUCH A RELATIONSHIP IS AN IDEAL...BUT "REAL LIFE" ISN'T ALWAYS LIKE THAT. IT'S IMPERFECT...IT'S GIVE-AND-TAKE.
GROWN-UPS KNOW AND COME TO ACCEPT HUMAN IMPERFECTION. BUT CHILDREN DON’...AND WON’T.

WITHOUT A COMPASSIONATE UNDERSTANDING OF THE IMPERFECT NATURE OF MANY HUMAN RELATIONSHIPS, A CHILD’S EDUCATION WILL BE...ITSELF...VERY IMPERFECT.

SO IF PARENTS ARE TO EDUCATE THEIR CHILDREN ABOUT HUMAN RELATIONSHIPS -- SEXUAL AND OTHERWISE -- THEY MUST FIRST UNDERSTAND AND ACCEPT THE NATURE OF THEIR OWN. FOR MANY, THAT’S HARD TO DO.

PARENTS -- AND ADULTS IN GENERAL -- ARE NOT VERY GOOD ABOUT TALKING TO EACH OTHER ABOUT THEIR SEXUALITY. THEY FEEL FRUSTRATED, GUILTY, AND EVEN ANGRY BECAUSE THEY ARE UNABLE TO DO THE THING THAT THEY KNOW -- INTELLECTUALLY AND EMOTIONALLY -- THEY SHOULD DO.

BUT THEY CAN’T.
IS IT ANY WONDER, THEN, THAT MANY PARENTS HAVE DIFFICULTY TELLING CHILDREN ABOUT THE FULL-DIMENSIONAL NATURE OF AN IDEAL HUMAN RELATIONSHIP.

NEVERTHELESS, I WANT PARENTS TO TRY. I WANT PARENTS TO DO THIS WITH COMPASSION...WITH RESPECT AND WITH LOVE...AND WITH SOME UNDERSTANDING NOT JUST OF THE CHILD WHO'S LISTENING...BUT ALSO OF THE ADULT WHO IS SPEAKING.

STILL, IT REMAINS AS MY SINCEREST WISH THAT THE PARENTS OF THIS COUNTRY WILL BE THE PRIMARY TEACHERS OF SEX AND HUMAN RELATIONS TO THE CHILDREN OF THIS COUNTRY.

I SAY THAT, KNOWING FULL WELL THAT MANY PARENTS SIMPLY CAN'T DO IT. BUT THE TASK SHOULD NOT THEREFORE BE LEFT, BY DEFAULT, TO THE MOVIES...TO TELEVISION...OR TO THE STREET-CORNER. WE CAN'T DO THAT, AND STILL PROTECT THE MILLIONS OF YOUNG LIVES THAT ARE AT RISK OF AIDS.
AND FOR ME, THAT’S THE COMPPELLING REASON WHY OUR SCHOOLS, CHURCHES, SYNAGOGUES, AND OTHER COMMUNITY INSTITUTIONS MUST DO WHATEVER POSSIBLE TO PROVIDE OUR CHILDREN WITH THE BEST AVAILABLE INFORMATION...PHYSICAL, SEXUAL, EMOTIONAL, AND PSYCHOLOGICAL...TO HELP THEM NEGOTIATE THEIR OWN WAY THROUGH THE HUMAN CONDITION.

YOU, AS RESPONSIBLE LEGISLATORS, ARE BEING CALLED UPON TO CONTRIBUTE TO THAT PROCESS, ALSO. AND I KNOW THAT THIS LEGISLATURE IS INDEED WRITING SUCH A RECORD IN THE INDELIBLE INKS OF COMPASSION AND DUTY.

I’VE DELIVERED THIS MESSAGE -- AND VARIATIONS OF IT -- MANY TIMES IN THE PAST FEW MONTHS. BUT IT DOESN’T GET ANY EASIER.

IT’S ESSENTIALLY A GRIM MESSAGE AND I GUESS I’M SOMETHING OF A GRIM COURIER.

MY ONLY HOPE IS THAT EVERY AMERICAN WHO HEARS OR READS MY MESSAGE, WILL BELIEVE IT AND DO HIS OR HER PART TO STOP THE SPREAD OF AIDS...TO PROTECT AND SAVE THE LIVES OF PEOPLE AT RISK, INCLUDING AND ESPECIALLY OUR UNSUSPECTING YOUNG PEOPLE...AND THAT THEY WILL HELP RETURN SEXUALITY BACK TO ITS RIGHTFUL PLACE IN THE SPECTRUM OF HUMAN EXPERIENCE: HAVE IT AGAIN BE A PART OF THE TOTAL COMPLEX OF HUMAN, CARING, INTERPERSONAL RELATIONS.
SUCH RELATIONS, IN MY BOOK ANYWAY, ARE KNOWN AS "TRUE LOVE."

WHICH LEADS ME TO MY FINAL WORD. IT'S NOT MINE REALLY. IT'S THE LAST SENTENCE OF THE BRIDGE OF SAN LUIS REY, THE LITTLE NOVEL WRITTEN BY THE LATE THORNTON WILDER, ONE OF OUR GREATEST NOVELISTS AND PLAYWRIGHTS.

WILDER CONCLUDED THAT NOVEL BY OBSERVING...

"THERE IS A LAND OF THE LIVING AND A LAND OF THE DEAD AND THE ONLY BRIDGE IS LOVE...THE ONLY SURVIVAL, THE ONLY MEANING."

THANK YOU.

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