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Bush's abstinence man

Tom Coburn, head of the president's AIDS advisory council, preaches his preference for "just say no" over condombased HIV education By Chris Bull

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Gay men have long subscribed to an AIDS prevention strategy that can be summed up in a single word: condoms. But now one of President Bush's top AIDS advisers, conservative Oklahoma physician and former U.S. representative Tom Coburn, says he would like to change that strategy—both inside and outside the gay community.



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"I do believe in condoms for HIV prevention," Coburn tells *The Advocate*. "But I also believe in informed consent about the effectiveness of condoms. Ask any expert you want, and they will tell you that condoms are not always effective, and people have a right to know this."

During his tenure in Congress, Coburn, who in January was tapped to cochair the Presidential Advisory Council on HIV and AIDS (along with former Health and Human Services secretary Louis Sullivan), called for warning labels on condom packages stating that they do not prevent the spread of some sexually transmitted diseases. In 2001, Coburn demanded the resignation of the director of the federal Centers for Disease Control and Prevention, Jeffrey Koplan, who he charged had kept from the "American people the truth of condom ineffectiveness."

Coburn's position is a fundamental break with mainstream public health thinking. And even in the Bush administration, he hardly represents the majority view. Scott Evertz, the president's openly gay director of the Office of National AIDS Policy, is a proponent of education that includes instructions about the proper use of condoms. Nevertheless, since Bush tapped Richard Carmona—a man

many expect will focus on bioterrorism-related health concerns—as U.S. surgeon general in March, activists believe Coburn will become the president's go-to guy when it comes to HIV and AIDS.

Coming at a time when HIV infection rates are climbing among sexually active gay men—some of whom are eschewing prophylaxis altogether—Coburn's new role is yet another major challenge, AIDS educators say.

"In our years of following the epidemic, we've never seen such a triumph of conservative ideology over sound concern about public health from someone who is in such a position of power," says Bill Smith, director of public policy for the Sexuality Information and Education Council of the United States. "Time and time again, we learn in focus groups with young people that they are being taught that condoms don't work, that HIV can get through holes in them. So they don't even bother using them. While it is true that condoms are not effective 100% of the time, we know for a fact that they are effective against the transmission of HIV."

Coburn, who peppers his remarks with references to exposure rates for a long list of STDs, says that instead of safer sex, he advocates abstinence or, in the case of gay men, monogamy.

Traditionally, advocates of abstinence-until-marriage education have ignored the situation of gay men and lesbians, who of course are denied the right to marry. Coburn, who opposes same-sex marriage, has obviously given this conundrum some thought. "If you asked if all gay men were monogamous, would there be fewer HIV infections, the answer is yes," he says. "The consequences of nonmonogamy are terrible. It tears up relationships and can make people vulnerable to STDs."

In addition, Coburn seeks to emphasize what he calls "responsibility" in HIV-education campaigns. "If you already have HIV, you have an ethical obligation not to give it to someone else," he says. "Unless both partners are positive and have the same strain of the virus, I don't think that anyone with HIV should be doing anything to put anyone else at risk."

Asked how health officials should respond to those who refuse to let their sex partners know they are HIV-positive, Coburn points to European nations as a model. "If someone is running around infecting others with tuberculosis, health

officials can quarantine someone," he says. "Look, I'm not proposing quarantine here. Most people are ethical and will do the right thing. Human beings are capable of terrible things and great things. I'm just saying that we should make the ethical responsibility clear here. If people who know they are HIV-positive, whether straight or gay, would simply take care not to give the virus to anyone else, we would have 25,000 infections per year instead of 50,000."

Smith agrees—to a point.

"Everything Coburn is talking about—marriage, monogamy, moral responsibility—are good things," he says. "How can anyone argue with them? But he erects straw men all over the place. The problem is usually not that young people are irresponsible or immoral or uninterested in monogamy. The problem is that they are quite often not getting the information and education they need to protect themselves."

The 35-member AIDS council Coburn now leads, which retains nine members appointed by former president Bill Clinton, is deeply divided along ideological lines. Coburn has insisted he is willing to subordinate his personal beliefs to help forge consensus on the council. And Coburn, a strong Republican advocate for AIDS funding while in Congress, has been known to have a politically unorthodox streak. In 1999, for example, he addressed a meeting of the Log Cabin Republicans, a gay group.

But at the same time, Coburn faces some obstacles of his own making. Longtime AIDS educators are deeply suspicious of his political and religious beliefs, especially when it comes to gay rights. As a member of Congress from 1995 to 2001, he earned a 0 rating from the gay political group Human Rights Campaign. And in 1999, responding to questions about his appearance before Log Cabin, Coburn told the Family Research Council, a conservative Christian lobbying group, that "no one stands harder against homosexuality than I do. But Jesus went not to the righteous but to sinners. Homosexuals are caught in a desperate situation, and they are trying to defy it any way they can."

Coburn has not backed down from these views. Indeed, as an obstetrician and gynecologist, he does not always carefully separate his religious-based political beliefs from his medical practice. Asked what he, as a physician, would tell a young man struggling with his sexual orientation, Coburn responded with what could be a very clear indication of how he will handle the public policy concerns of gay men and lesbians. "I would send him to people I know who are gay," he says. "And I would also send him to people I know who used to be gay and who are not living that lifestyle now. But no matter what, if he were my patient, I would support him. That's what's most important. We have to support people who are our patients."

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