

Former surgeon general's 1979 speech still inspirational

Last Sunday, Dr. Julius B. Richmond, former U.S. surgeon general and assistant secretary of Health Education and Welfare from 1977 to 1981, died at age 92. His contributions to the advancement of pediatrics and mental health, as well as his leadership in government and medical academia, spanned nearly 70 years. Perhaps more than any other medical figure of the 20th century, Richmond's name became synonymous with access and equity in health care delivery.

Richmond was also a great admirer of the College of Community Sciences of the University of Alabama and its founding dean, William R. Willard. On Oct. 25, 1979, while serving as surgeon general, Richmond came to Tuscaloosa to honor Willard by dedicating the new Willard Auditorium at DCH Hospital.

A few years ago, while serving with Richmond on the medical advisory board of the Flight

Attendant Medical Research Foundation, which sponsors research and education of the health effects of exposure to secondhand tobacco smoke, Richmond gave me a copy of his remarks in Tuscaloosa. He repeatedly told me before illness struck last year that he fondly recalled the occasion and hoped to visit the college again.

The following is an excerpt of his speech, "Some Thoughts on a Quiet Pioneer," the message of which still provides inspiration to today's physicians-in-training and offers hope to all:

Many years ago Bill Willard saw the role of the physician as one who prevents disease and disability and who promotes good health. The physician is a healer, yes. But he is more than that in Bill's terms. That additional quality of commitment and training that Bill required of his staffs and students at Syracuse, Ky., and here in Tuscaloosa is a quality the nation itself now requires. It has

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taken us some time to catch up with Bill's vision of public health in our society, but I think we are at last getting close.

This year we released the Surgeon General's Report on Health Promotion and Disease Prevention. It has a much simpler title: Healthy People. But the simplicity of the title does not mean the overall tasks are simple. In that report we approached the issues of prevention and health promotion from three perspectives:

1. The health services available to individuals and communities, such as immunization programs, maternal and child health, and hypertension screening and control. ... We must try to shape them so that they contribute to the prevention of disease and disability in a coherent way.

2. Programs that control or eliminate danger in the work or home environments (such as highway

accidents, occupational safety, air and water quality) ... and that may be more critical in some communities than even the availability of physicians or emergency services.

3. The effects of personal and community lifestyles upon the attainment of good health. No amount of immunization or water fluoridation will lengthen the life of a heavy smoker. No amount of infant and child care can reverse the damage done to a fetus by an alcoholic mother. And communities that don't really care about accident prevention will continue to bear the tragic burden of more of its citizens being disabled for life. Volumes of work yet await publication to educate individuals and communities on their role in prevention and health promotion. ...

The report, Healthy People, represents a "holistic concept of the patient, his family, and his community." That phrase, by the way, comes not from our report but from the College of Community Health Sciences'

Statement of Purpose of its clinical program for medical students. When I read it I was once again struck with the directness and the contemporary sense of the mission of this school, as directed by Bill Willard for the past seven years. To quote again from the Statement of Purpose, a CCHS graduate should be able to "promote effectively, in individuals and communities, activities contributing to good health as well as the prevention of disease ..."

I believe that the Surgeon General's report will be translated into reality and that millions of our fellow citizens will benefit. I feel that way because we know that here in Tuscaloosa, with the help of Bill Willard and his dedicated staff, it has already begun to happen.

The focus here has not been only on prevention. It has also embraced another issue of great national importance: The need to distribute more equitably — geographically and by

specialty — the skills of our new physicians and dentists, nurses, medical social workers, and other health professionals ...

The outlines of the answer to the maldistribution problem can be seen in an institution such as the College of Community Health Sciences, which is dedicated to serving the surrounding communities and to sending its graduates into the underserved areas of the state of Alabama. This is not expressed here as just a good idea: It is embedded in the basic educational philosophy of this College ...

It works here. It can work nationally. The College is an institution to inspire the rest of us to make and to fulfill the promise of better health and health care for every American.

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