



10 DOWNING STREET
LONDON SW1A 2AA

27 March 1987

From the Private Secretary

Dear Geoffrey

AIDS

The Prime Minister has considered the draft reply to the Chief Rabbi which Charles Powell here asked for in his letter to you of 11 March. She has commented that the letter does not properly address the Chief Rabbi's main point, which is that the Government's campaign, in suggesting that everything will be all right if people take steps to have "safe" sex, may be spreading the disease and not restricting it.

Having looked through the Chief Rabbi's original letter, and considered the Prime Minister's comments on the suggested draft reply, I think the best approach might be for the Prime Minister to send a shorter letter responding to the Chief Rabbi's main point. The letter could also say that your Secretary of State would be sending a more detailed reply to the points made by the Chief Rabbi on the thinking behind the Government's campaign.

The shorter reply from the Prime Minister should, I think, directly address the central point in the Chief Rabbi's letter. That is to ask why the Government does not simply promote the straightforward traditional view that the right and only place for sex is within the context of faithful marriages. As I understand it, the Government's view is that a campaign along these lines - if effective - would certainly prevent the spread of AIDS. The difficulty is that the campaign would not in fact be successful. The Government had to take the difficult decision to use a formula which was likely to work, and which had to take as given first that many people's behaviour does not follow the "traditional" pattern and second that it was unlikely to be transformed as a result of a Government campaign. The way was then of course open for the position to be misunderstood, and for the Government to appear to condone practices with which it had no sympathy whatsoever (the pilot scheme for exchange needles being a particularly clear example). To keep any such misunderstandings to a minimum, the advertisements were worded very carefully.

Lin
MT2 AWJ

CF pps.

LS

It was an uncomfortable position to be in. But there was no way round it. Going ahead with the campaign was in short a thoroughly difficult decision, but one in the end the Government felt it had to take.

BF || I do not see why the Prime Minister needs to go very much further than this. I should be grateful for a revised draft along those lines, by Friday 3 April please.

Y e

Mark Addison

Mark Addison

Geoffrey Podger, Esq.,
Department of Health and Social Security.



fern

10 DOWNING STREET
LONDON SW1A 2AA

From the Private Secretary

9 April 1987

Thank you for your letter of 7 April to Janice Richards enclosing a redraft of the proposed letter for the Prime Minister to send to the Chief Rabbi about his memorandum on AIDS. The Prime Minister was not entirely content with the redraft, but on balance has decided that the Chief Rabbi was not expecting a reply and therefore there is no need for any further action.

(ANDY BEARPARK)

Edward Scarlett, Esq.,
Department of Health and Social Security.

ea



GR CF
PPS/PSC

10 DOWNING STREET

LONDON SW1A 2AA

THE PRIME MINISTER

*I still don't like the
letter - but don't think
the Chief Clerk was expected
a reply yet*

Thank you for letting me see a copy of the Memorandum on AIDS which you have prepared for the Social Services Select Committee: I read this with great interest.

I have sent a copy of the Memorandum to Norman Fowler as I am sure that he will wish to reply to your observations in detail. However, I felt that I should comment on your central point, that our campaign of public education will encourage promiscuity and that by promoting the use of, for example, condoms as a barrier against the spread of infection, the campaign might engender a false sense of security. You recommend that the campaign should take as its central plank the traditional view that the only right, and safe, place for sex is within the confines of a faithful and stable marriage. The first thing I should say is that I sympathise with your views and there is no doubt that if such messages, emphasising the moral dimension, were accepted and acted upon, a campaign on these lines would be successful in preventing the spread of the disease by intimate sexual contact. Our difficulty has been, however, that we do not believe that such a strategy would be effective quite simply because many people's attitudes to sex and relationships are not in accord with the traditional view. Indeed, our fear has been that if we were seen to be putting out only the moral view we might alienate those individuals and groups

whose sexual behaviour and attitudes we are most seeking to change and thus we would increase the health risk to the population as a whole. Much the same considerations apply to the line we are taking on the relationship between drug misuse and the spread of the disease.

I know you will appreciate that we have had to strike a balance between the need to put out messages about AIDS which address the practical health education issues involved and which everybody can accept regardless of their own morals and beliefs as against the need not to be seen to be condoning practices with which we have no sympathy whatever. We have tried at all stages of the campaign to ensure that the wording and presentation of our publicity material reflects this balance. Our advocacy of the use of condoms is a good example in as much as we have had to accept that though risky sexual practices should be avoided, some will persist in them and the use of condoms is a positive way in which such people can reduce the risk of contracting or spreading infection.

Rabbi Sir Immanuel Jakobovits.



cc BG

DEPARTMENT OF HEALTH & SOCIAL SECURITY
Alexander Fleming House, Elephant & Castle, London SE1 6BY
Telephone 01-407 5522

From the Secretary of State for Social Services

PO/ 8503/K55

- 7 APRIL 1987

Ms Janice Richards
10 Downing Street
LONDON
SW1

S.P. by type.

Dear Janice,

Thank you for the letter of *27 March* from
Mark Addison I enclose a draft reply.

Yours sincerely
E. Scarlett.

EDWARD SCARLETT
Private Office

PIAB

*Better - but I think the
draft still needs doctoring
(it that is the appropriate
word). MBT*

ENC

SUGGESTED DRAFT REPLY THAT THE PRIME MINISTER MIGHT WISH TO SEND TO THE CHIEF RABBI - reflecting the views expressed in Mark Addison's letter of 27 March

Thank you for letting me see a copy of the Memorandum on AIDS which you have prepared for the Social Services Select Committee: ~~and which I read~~ ^{this} with great interest.

I have ~~taken the liberty of sending~~ ^e a copy of the Memorandum to Norman Fowler as I am sure that he will wish to ~~study its detailed~~ ^{reply to your observations} ~~observations.~~ ^{in greater detail.} However, I felt that I should comment on your central point, that our campaign of public education will encourage promiscuity and that by promoting the use of, for example, condoms as a barrier against the spread of infection, the campaign might engender a false sense of security. You recommend that the campaign should take as its central plank the traditional view that the only right, and safe, place for sex is within the confines of a faithful and stable marriage. The first thing I should say is that I have ^{sympathise} ~~a good deal of sympathy~~ with your views ~~on this~~ and there is no doubt that if such messages, emphasising the moral dimension, were accepted and acted upon, a campaign on these lines would be successful in preventing the spread of the disease by intimate sexual contact. Our difficulty has been, however, that we do not believe that such a strategy would be effective quite simply because many people's attitudes to sex and relationships are not in accord with the traditional view. Indeed, our fear has been that if we were seen to be putting out only the moral view we might ~~well succeed only in~~ alienating ^e just those individuals and groups whose sexual behaviour

FILE

and attitudes we are most seeking to change and thus we would increase the health risk to the population as a whole. Much the same considerations apply to the line we are taking on the relationship between drug misuse and the spread of the disease.

I ^{know} hope ~~that~~ you will appreciate that we have had to ~~come to grips with~~ the ~~difficult task of~~ striking ^e and preserving a balance between the need to put out messages about AIDS which address the practical health education issues involved and which ^{everybody} all can accept regardless of their own morals and beliefs ^{as against} and the need not to be seen to be condoning practices with which we have no sympathy whatever. We have tried at all stages of the campaign to ensure that the wording and presentation of our publicity material reflects this balance. Our advocacy of the use of condoms is a good example in as much as we have had to accept that though, ~~ideally~~, risky sexual practices should be avoided, some will persist in them and the use of condoms is a positive way in which such people can reduce the risk of contracting or spreading infection.

Thank you once again for letting me see your Memorandum and for your endorsement of our view that AIDS presents a serious threat to society which needs to be tackled as a matter of urgency and with understanding and compassion for those infected with the virus and suffering the effects of the disease.

MRS MARGARET THATCHER

The Prime Minister ?



10 DOWNING STREET

LONDON SW1A 2AA

THE PRIME MINISTER

*This point is that by saying that everything
is all right if you take steps to have 'safe' sex - you
may be prejudice the disease or not restricting it.*

Thank you for letting me see a copy of the memorandum on AIDS which you have prepared for the Social Services Select Committee which I have read with great interest.

I am most encouraged that you share our view that AIDS presents a serious threat to society which needs to be tackled as a matter of urgency and with compassion and understanding for those infected with the virus and suffering the effects of the disease.

Your memorandum deals very fully with the complex, social, practical and moral issues related to the disease and the way infection is transmitted. I do understand your view that our campaign of public education does not ^{sufficiently} ~~go far enough~~ in stressing the moral dimension. AIDS by its very nature gives rise to a number of important moral issues that have to be faced by each of us as individuals and by society as a whole. However, as AIDS is an incurable disease which can be contracted by any man or woman if they have sexual intercourse with an infected person, we took the view that our primary responsibility was to take all practical steps to counter its spread and that the major weapon in our armoury was public health education. The objectives of our campaign

have been to raise the general level of awareness of the facts about AIDS, how it is spread and how the spread of infection can be controlled among both the public as a whole and those in high risk groups. We have emphasised that individuals can, by their actions, help to control the spread of the disease, and that those who may be at risk from infection should take positive action to protect themselves and others. We have had to accept that though, ideally, risky sexual activities should be avoided altogether, some will persist and we have, therefore, advocated, as part of our campaign, measures to reduce the risk of possible transmission of the virus.

Naturally, we have given a great deal of thought as to how these vital messages should be put across and, indeed, continue to do so in considering future strategy. We concluded that we needed to be direct in our approach using language which would be generally acceptable regardless of people's own morals and beliefs. We have also had to strike a balance between the need to convince people of the urgency of the situation and to avoid causing unnecessary panic and personal alarm. We have also had to be realistic in our approach and have had to face up to the unpalatable fact that if, in the campaign's messages, we were seen to be moralising, we may have alienated those whose attitudes and behaviour we were seeking to change. Of course, not everyone will agree with us in this. But I firmly believe that the campaign in carrying a strong message of prudence complements the moral dimension to which you have drawn attention in your memorandum and is in no way opposed to it.

The campaign is being closely monitored at every stage and you will I am sure be pleased to learn that the preliminary results of the market research we have commissioned are very encouraging. There is evidence that the campaign's objectives are being met and that it is also providing the reassurance needed to dispel some of the groundless fears of infection. The next stages of the

campaign are now being planned in the light of the results of this research and the lessons we have learned from the first phase.

We believe that the public education campaign is helping to bring about a change in moral attitudes, that people who are at most risk are now realising the dangers of promiscuity and are beginning to change their lifestyles.

We are of course concerned that information is targeted specifically at young people so that they too will learn about and understand the dangers associated with AIDS. We have therefore mounted a special campaign aimed at the young in the form of cinema advertisements and advertisements in youth magazines.

However, the only way to teach young people that they need to adopt a sound personal lifestyle and avoid risky practices is by advice and example. We do, of course, expect parents to discuss with their children any questions they may raise about AIDS in a sympathetic and responsible manner and to give moral guidance whenever necessary. Teachers also have an important role to play in this and that is why we are helping them, together with youth workers, to be able to teach about AIDS and answer questions both knowledgeably and most importantly with understanding.

Once again, thank you for letting me see and have an opportunity to comment upon your memorandum of evidence which I see as a thoughtful and helpful contribution to the public debate on the subject of AIDS.

Rabbi Sir Immanuel Jakobovits.



CSP.

DEPARTMENT OF HEALTH & SOCIAL SECURITY

Alexander Fleming House, Elephant & Castle, London SE1 6BY

Telephone 01-407 5522

From the Secretary of State for Social Services

PO/ 8503/408

Ms Janice Richards
10 Downing Street
LONDON
SW1

26 MARCH 1987

Re L/h

Dear Janice,

Thank you for the letter of 11 March from
Charles Powell I enclose a draft reply.

pop
Yours sincerely
E. Scarlett.

EDWARD SCARLETT
Private Office

ENC

* Redraft attached - my previous letter dated 18/3/87.

The CHIEF RABBI

LOBAEK

Thank you for letting me see a copy of the memorandum on AIDS which you have prepared for the Social Services Select Committee, ^{which I have} ~~I have read it~~ with great interest.

I am most encouraged that you share our view that AIDS presents a serious threat to society which needs to be tackled as a matter of urgency and with compassion and understanding for those infected with the virus and suffering the effects of the disease. Your memorandum ^{deals very fully with} ~~exhibits understanding~~ of the complex, social, practical and moral issues related to the disease and the way infection is transmitted. ^{do} I fully understand your view that our campaign of public education does not go far enough in stressing the moral dimension. AIDS by its very nature gives rise to a number of important moral issues that have to be faced by each of us as individuals and by society as a whole. However, as AIDS is an incurable disease which can be contracted by any man or woman if they have sexual intercourse with an infected person, we took the view that our primary responsibility was to take all practical steps to counter its spread and that the major weapon in our armoury was public health education. The objectives of our campaign have been to raise the general level of awareness of the facts about AIDS, how it is spread and how the spread of infection can be controlled among both the public as a whole and those in high risk groups. We have emphasised that individuals can, by their actions, help to control the spread of the disease, and that those who may be at risk from infection should take positive action to protect themselves and others. We have had to accept that though, ideally, risky sexual activities should be

avoided altogether, Some will persist and we have, therefore advocated, as part of our campaign, measures to reduce the risk of possible transmission of the virus.

Naturally, we have given a great deal of thought as to how these vital messages should be put across and, indeed, continue to do so in considering future strategy. We concluded that we needed to be direct in our approach using language which would be generally acceptable regardless of people's own morals and beliefs. We have also had to strike a balance between the need to convince people of the urgency of the situation and to avoid causing unnecessary panic and personal alarm. We have also had to be realistic in our approach and have had to face up to the, to many, unpalatable fact that if, in the campaigns messages, we were seen to be moralising we ~~would~~^{may} have alienated ~~just~~ those whose attitudes and behaviour we were seeking to change. Of course, not everyone will agree with us in this. But I firmly believe that the campaign in carrying a strong message of prudence complements the moral dimension to which you have drawn attention in your memorandum and is in no way opposed to it.

The campaign is being closely monitored at every stage and you will, I am sure be pleased to learn that the preliminary results of the market research we have commissioned are very encouraging. There is evidence that the campaign's objectives are being met and that it is also providing the reassurance needed to dispel some of the groundless fears of infection. The next stages of the campaign are now being planned in the light of the results of

this research and the lessons we have learned from the first phase.

We believe that the public education campaign is helping to bring about a change in moral attitudes, that people who are at most risk are now realising the dangers of promiscuity and are beginning to change their lifestyles.

We are of course concerned that information is targetted specifically at young people so that they too will learn ~~about~~^{about} and understand_s the dangers associated with AIDS. We have therefore mounted a special campaign aimed at ~~them~~^{the young} in the form of cinema advertisements and advertisements in youth magazines.

However, the only way to teach young people ^{that} they need to adopt a sound personal lifestyle and ~~to~~ avoid risky practices is by advice and example. We do, of course, expect parents to discuss with their children any questions they may raise about AIDS in a sympathetic and responsible manner and to give moral guidance whenever necessary. Teachers also have an important role to play in this and that is why we are helping them, together with youth workers, to be able to teach about AIDS and answer questions both knowledgeably and most importantly with understanding.

Once again, thank you for letting me see and have an opportunity to comment upon your memorandum of evidence which I see as a thoughtful and helpful contribution to the public debate on the subject of AIDS.



w. e.f.

DEPARTMENT OF HEALTH & SOCIAL SECURITY
Alexander Fleming House, Elephant & Castle, London SE1 6BY

Telephone 01-407 5522

From the Secretary of State for Social Services

PO/ 8503/408

Ms Janice Richards
10 Downing Street
LONDON
SW1

18 MARCH 1987

Dear Janice,

at trap

Thank you for the letter of 11 March from Charles Powell. I enclose a draft reply.

Yours sincerely
E. Scarlett

EDWARD SCARLETT
Private Office

ENC

* Parliamentary protocol requires this reply to be copied to the Select Committee.

PO(9)8503/408

The Chief Rabbi

Thank you for letting me have a copy of the evidence you have submitted to the Social Services Select Committee of the House of Commons in relation to their enquiry into AIDS. I look forward to the Committee's response to your evidence, and that of others, on this important matter.

*Please type
to
sig*

[Handwritten signature]



10 DOWNING STREET

LONDON SW1A 2AA

From the Private Secretary

11 March 1987

AIDS

BF // When the Chief Rabbi came to see the Prime Minister this afternoon on other business, he handed over to her the enclosed memorandum on AIDS which he had been asked to prepare by the Social Services Committee of the House of Commons. I should be grateful for a draft letter of comment on it which the Prime Minister might send the Chief Rabbi in due course.

CHARLES POWELL

Geoffrey Podger, Esq.,
Department of Health and Social Security.

Rh

MEMORANDUM ON AIDS

Submitted by the Chief Rabbi to the Social Services Committee
of the House of Commons

This Memorandum deals specifically with the public response to the challenge of AIDS, with special reference to the Government campaign as projected through the media.

I realise of course that there will be many new complex moral problems to be faced beyond those to which I have addressed myself. They will concern, for instance, questions on compulsory testing, the identification of carriers, the right of insurance companies or employers to obtain medical data otherwise protected by confidentiality, the risks to life in experimenting on possible cures or vaccines, and numerous other such perplexities. I do not know how far the remit of the Committee includes considering such questions. Nor could I readily produce answers for which I could claim moral authenticity in the light of Jewish teachings. But I am prepared to probe into these issues if ~~you~~ invited to give an opinion on them.

The Government is to be applauded on the urgency, boldness, and effectiveness manifest in its campaign. It appears to strike the right balance between hysteria and complacency, between alerting, even alarming, the population on the potentially awesome threat posed by the scourge, and reassuring citizens against undue panic, which could lead to communal neurosis already widespread in the USA.

It is also important to consider the possible effects of causing the "high-risk" groups to sense that they may be threatened by mounting discrimination in employment, education and social integration. Such a feeling, if allowed to become acute, could well encourage a sense of despair and resentment, breeding the desire to seek safety in numbers, even by deliberately spreading the contagion. The utmost care is therefore needed in dealing with the affected groups compassionately and with understanding, individually as well as collectively, so as to ward off the danger of major social tensions erupting into violence and other threats to the population at large.

On the other hand, I am disturbed by the general thrust of the publicity campaign, as epitomised by the slogan "Don't Die of Ignorance". Ignorance is not a fatal disease, and the real source of the danger through irresponsible behaviour ought to be far more explicitly spelt out.

Of course, I appreciate that a government cannot take a moral stance, particularly on an issue on which public opinion is widely divided, and which affects so delicately the most intimate human relations. I accept the need for moral neutrality. But I cannot accept anything which publicly condones or encourages immorality. The present campaign does.

By speaking of "safe sex" or "safer sex", and by advising on recourse to condoms "unless you are sure of your partner", the campaign officially accepts some form of extra-marital relations as the norm. This introduces into millions of perfectly moral homes, and especially of children and young people hitherto sheltered from

exposure to indecency and marital faithlessness, notions that had been utterly alien and unknown to them. This itself is immoral, and may in time prove a source of major moral corruption for the very element of society most concerned to preserve its immunity to pernicious influences of this kind. The slant of the campaign also provides justification for deviations from moral norms for those who may have hitherto looked on "casual sex" and promiscuous conduct with some degree of disquiet or even guilt. This, too, is immoral.

Altogether, in effect the campaign encourages promiscuity by advertising it. It tells people not what is right, but how to do wrong and get away with it - much like sending people into a contaminated atmosphere, but providing them with gas-masks and protective clothing. It quite wrongly assumes some inability to exercise self-control, which is clearly the ultimate answer to the spread of the affliction.

Equally worrying is the sense of false security promoted in the campaign. By creating the impression that condoms are an effective safeguard, one can ultimately only increase the danger. Neither are condoms absolutely reliable when used, nor are they always likely to be used in moments when passions are aroused. Condoms cannot replace self-discipline as a shield against infection, and any pretence to the contrary is dangerous in the extreme. By promising safety, the campaign would only increase the spread of AIDS in the long run.

Moral attitudes are clearly already undergoing some significant changes, as borne out in the latest Gallup Poll (commissioned by the Bradman Charitable Foundation and issued in February 1987). It shows that 74% of the sample (1,115 people aged 16 and over) agreed that the only way of avoiding AIDS was to stick to one faithful partner, whilst 96% wanted schools to warn children about the dangers of casual sex. The Government should not do anything to inhibit this trend or to impede its gaining momentum.

It should also be realised that far greater than the suffering and expenditure imposed by AIDS on society is the social damage and financial cost caused by marriage break-downs or "alternative lifestyles" - in particular the appalling predilection to crime, violence and drug-addiction among children raised in the absence of a loving home, as well as in terms of inefficiency, anxiety and sheer desperation while at work among people afflicted by marital failure or unhappiness. Apart from the astronomical economic cost of this drag on output and social services, the resultant depression in turn drives people to sexual adventures outside marriage which cannot but aggravate the incidence of AIDS.

The public campaign should therefore be thoroughly revised and redirected towards emphasising marital stability as the only "safe" norm. Encouragement should be given, if only by token contributions to marriage training and counselling agencies, to some intensive preparation for the responsibilities of marriage inside and outside schools, eventually as a prerequisite for marriage registrations, in much the same way as driving courses leading to successful tests are taken for granted as a condition for the issue of driving licences to prevent damage and injury through inadequate training or

recklessness. Sex education at schools should be specifically geared to preparation for marriage, including the avoidance of pre-marital sex which cannot but undermine a subsequent marriage as an anti-climax.

At the same time, it is not enough for the positive aspects of the campaign to be more explicit to the point of encouraging fidelity in marriage (not "stable partners" which is a circumlocution for immoral non-marital relations). The negative aspects, too, need to be spelt out more directly. With all the publicity of statistics, the population does not know that 96% of AIDS victims are in the "high risk" groups, and that these are made up overwhelmingly of homosexuals, with the rest through promiscuity and drug abuse. These facts must not be concealed by suppression or be fudged by euphemisms. They are as essential in public enlightenment as the knowledge that the virus may be transmitted by unclean needles or infected blood.

In short, the campaign should say plainly: AIDS is the consequence of pre-marital sex, marital infidelity, sexual deviation and social irresponsibility - sacrificing enduring happiness for momentary pleasures, and putting selfish indulgence before duty and discipline. In today's climate of moral questioning and a greater readiness to revise personal "life-styles", the message will not go unheeded, and the long-term effects in repairing the social fabric based on solid marriages may prove to be enormous in defending society against dangers far transcending the awesome ravages of AIDS.

