The Teen Sexual Revolution – Abstinence Programs Are The Only Biblical Response

Kerby Anderson considers the real problems created by the new American attitude extolling the virtues of teen sexual activity. He examines the effectiveness of various programs designed to stem the tide of teen sexual activity. He concludes the only reasonable approach is teaching the reasons for and benefits of abstinence prior to marriage.

One of the low points in television history occurred September 25, 1991. The program was "Doogie Howser, M.D." This half-hour TV show, aimed at preteen and teenage kids, focused on the trials and tribulations of an 18-year-old child prodigy who graduated from medical school and was in the midst of medical practice. Most programs dealt with the problems of being a kid in an adult's profession. But on September 25 the "problem" Doogie Howser confronted was the fact that he was still a virgin.

Advance publicity drove the audience numbers to unanticipated levels. Millions of parents, teenagers, and pajama-clad kids sat down in front of their televisions to watch Doogie Howser and his girlfriend Wanda deal with his "problem." Twenty minutes into the program, they completed the act. Television ratings went through the roof. Parents and advertisers should have as well.

What is wrong with this picture? Each day approximately 7700 teenagers relinquish their virginity. In the process, many will become pregnant and many more will contract a sexually transmitted disease (STD). Already 1 in 4 Americans have an STD, and this percentage is increasing each year. Weren't the producers of "Doogie Howser, M.D." aware that teenage

pregnancy and STDs are exploding in the population? Didn't they stop and think of the consequences of portraying virginity as a "problem" to be rectified? Why weren't parents and advertisers concerned about the message this program was sending?

Perhaps the answer is the trite, age-old refrain "everybody's doing it." Every television network and nearly every TV program deals with sensuality. Sooner or later the values of every other program were bound to show up on a TV program aimed at preteens and teenagers. In many ways the media is merely reflecting a culture that was transformed by a sexual revolution of values. Sexually liberal elites have hijacked our culture by seizing control of two major arenas. The first is the entertainment media (television, movies, rock music, MTV). The second is the area of sex education (sex education classes and school- based clinics). These two forces have transformed the social landscape of America and made promiscuity a virtue and virginity a "problem" to be solved.

The Teenage Sexuality Crisis

We face a teenage sexuality crisis in America. Consider these alarming statistics of children having children. A New York Times article reported: "Some studies indicate three-fourths of all girls have had sex during their teenage years and 15 percent have had four or more partners." A Lou Harris poll commissioned by Planned Parenthood discovered that 46 percent of 16-year-olds and 57 percent of 17-year-olds have had sexual intercourse.

Former Secretary of Education William Bennett in speaking to the National School Board Association warned that "The statistics by which we measure how our children how our boys and girls are treating one another sexually are little short of staggering." He found that more than one-half of America's young people have had sexual intercourse by the time they are seventeen. He also found that more than one million teenage

girls in the U.S. become pregnant each year. Of those who give birth, nearly half are not yet eighteen.

“These numbers,” William Bennett concluded, “are an irrefutable indictment of sex education’s effectiveness in reducing teenage sexual activity and pregnancies.” Moreover, these numbers are not skewed by impoverished, inner city youths from broken homes. One New York polling firm posed questions to 1300 students in 16 high schools in suburban areas in order to get a reading of “mainstream” adolescent attitudes. They discovered:

- *57% lost virginity in high school*
- *79% lost virginity by the end of college*
- *16.9 average age for sex*
- *33% of high school students had sex once a month to once a week*
- *52% of college students had sex once a month to once a week.*

Kids are trying sex at an earlier age than ever before. More than a third of 15-year-old boys have had sexual intercourse as have 27 percent of the 15-year-old girls. Among sexually active teenage girls, 61 percent have had multiple partners. The reasons for such early sexual experimentation are many.

Biology is one reason. Teenagers are maturing faster sexually due to better health and nutrition. Since the turn of the century, for example, the onset of menstruation in girls has dropped three months each decade. Consequently, urges that used to arise in the mid-teens now explode in the early teens. Meanwhile the typical age of first marriage has risen more than four years since the 1950s.

A sex-saturated society is another reason. Sex is used to sell everything from cars to toothpaste. Sexual innuendos clutter

most every TV program and movie. And explicit nudity and sensuality that used to be reserved for R-rated movies has found it way into the home through broadcast and cable television. Media researchers calculate that teenagers see approximately five hours of TV a day. This means that they see each year nearly 14,000 sexual encounters on television alone.

Lack of parental supervision and direction is a third reason. Working parents and reductions in after-school programs have left teenagers with less supervision and a looser after-school life. In the inner city, the scarcity of jobs and parents coupled with a cynical view of the future invites teenage promiscuity and its inevitable consequences. Adolescent boys in the suburbs trying to prove their masculinity, herd into groups like the infamous score- keeping Spur Posse gang in California.

Even when teenagers want to sit out the sexual revolution, they often get little help from parents who may be too embarrassed or intimidated to talk to their children. Parents, in fact, often lag behind their kids in sexual information. At one sex-education workshop held by Girls Inc. (formerly Girls Club of America), nearly half of the mothers had never seen a condom. Other mothers did not want to talk about sex because they were molested as children and were fearful of talking about sex with their daughters.

Teenagers are also getting mixed messages. In any given week, they are likely to hear contradictory messages. “No sex until you’re married.” “No sex unless you’re older.” “No sex unless you’re protected.” “No sex unless you’re in love.” No wonder adolescents are confused.

The Report Card on Sex Education

For more than thirty years proponents of comprehensive sex education have told us that giving sexual information to young children and adolescents will reduce the number of unplanned

pregnancies and sexually transmitted diseases. In that effort nearly $3 billion has been spent on federal Title X family planning services, yet teenage pregnancies and abortions rise.

Perhaps one of the most devastating popular critiques of comprehensive sex education came from Barbara Dafoe Whitehead. The journalist who said that Dan Quayle was right also was willing to say that sex education was wrong. Her article in the October 1994 issue of *Atlantic Monthly* entitled "The Failure of Sex Education" demonstrated that sex education neither reduced pregnancy nor slowed the spread of STDs.

Comprehensive sex education is mandated in at least 17 states, so Whitehead chose one state and focused her analysis on the sex education experiment in New Jersey. Like other curricula the New Jersey sex education program rests on certain questionable assumptions.

The first tenet is that children are "sexual from birth." Sex educators reject the classic notion of a latency period until approximately age twelve. They argue that you are "being sexual when you throw your arms around your grandpa and give him a hug."

Second, sex educators hold that children are sexually miseducated. Parents, in their view, have simply not done their job, so we need "professionals" to do it right. Parents try to protect their children, fail to affirm their sexuality, and even discuss sexuality in a context of moralizing. The media, they say, is also guilty of providing sexual misinformation.

Third, if miseducation is the problem, then sex education in the schools is the solution. Parents are failing miserably at the task, so "it is time to turn the job over to the schools. Schools occupy a safe middle ground between Mom and MTV."

Learning About Family Life is the curriculum used in New Jersey. While it discusses such things as sexual desire, AIDS,

divorce, condoms, and masturbation, it nearly ignores such issues as abstinence, marriage, self-control, and virginity. One technique promoted to prevent pregnancy and STDs is noncoital sex, or what some sex educators call outercourse. Yet there is good evidence to suggest that teaching teenagers to explore their sexuality through noncoital techniques will lead to coitus. Ultimately, outercourse will lead to intercourse.

Whitehead concludes that comprehensive sex education has been a failure. For example, the percent of teenage births to unwed mothers was 67 percent in 1980 and rose to 84 percent in 1991. In the place of this failed curriculum, Whitehead describes a better program. She found that "sex education works best when it combines clear messages about behavior with strong moral and logistical support for the behavior sought." One example she cites is the *Postponing Sexual Involvement* program at Grady Memorial Hospital in Atlanta, Georgia, which offers more than a "Just Say No" message. It reinforces the message by having adolescents practice the desired behavior and enlists the aid of older teenagers to teach younger teenagers how to resist sexual advances. Whitehead also found that "religiously observant teens" are less likely to experiment sexually, thus providing an opportunity for church-related programs to stem the tide of teenage pregnancy. The results of Whitehead's research are clear: abstinence is still the best form of sex education.

Is "Safe Sex" Really Safe?

At the 1987 World Congress of Sexologists, Theresa Crenshaw asked the audience, "If you had the available partner of your dreams and knew that person carried HIV, how many of you would have sex depending on a condom for your protection?" When they were asked for a show of hands, none of the 800 members of the audience indicated that they would trust the condoms. If condoms do not eliminate the fear of HIV-infection for

sexologists and sex educators, why do we encourage the children of America to play STD Russian Roulette?

Are condoms a safe and effective way to reduce pregnancy and STDs? To listen to sex educators you would think so. Every day sex education classes throughout this country promote condoms as a means of safe sex or at least safer sex. But the research on condoms provides no such guarantee.

For example, Texas researcher Susan Weller writing in the 1993 issue of *Social Science Medicine*, evaluated all research published prior to July 1990 on condom effectiveness. She reported that condoms are only 87 percent effective in preventing pregnancy and 69 percent effective in reducing the risk of HIV infection. This translates into a 31 failure rate in preventing AIDS transmission. And according to a study in the 1992 Family Planning Perspectives, 15 percent of married couples who use condoms for birth control end up with an unplanned pregnancy within the first year.

So why has condom distribution become the centerpiece of the U.S. AIDS policy and the most frequently promoted aspect of comprehensive sex education? For many years, the answer to that question was an a priori commitment to condoms and a safe sex message over an abstinence message. But in recent years, sex educators and public health officials have been pointing to one study which appeared to vindicate the condom policy.

The study was presented at the Ninth International Conference on AIDS held in Berlin on June 9, 1993. The study involved 304 couples with one partner who was HIV positive. Of the 123 couples who used condoms with each act of sexual intercourse, not a single negative HIV partner became positive. So proponents of condom distribution thought they had scientific vindication for their views.

Unfortunately that is not the whole story. Condoms do appear to be effective in stopping the spread of AIDS when used

“correctly and consistently.” Most individuals, however, do not use them “correctly and consistently.” What happens to them? Well, it turns out that part of the study received much less attention. Of 122 couples who could not be taught to use condoms properly, 12 became HIV positive in both partners. Undoubtably over time, even more partners would contract AIDS.

How well does this study apply to the general population? I would argue the couples in the study group were quite dissimilar from the general population. For example, they knew the HIV status of their spouse and therefore had a vested interest in protecting themselves. They were responsible partners and in a committed monogamous relationship. In essence, their actions and attitudes differ dramatically from teenagers and single adults who do not know the HIV status of their partners, are often reckless, and have multiple sexual partners.

Contrary to popular belief, condoms are not as reliable as public health pronouncements might lead you to think. Abstinence is still the only safe sex.

Only Abstinence-Only Programs Really Work

Less than a decade ago, an abstinence-only program was rare in the public schools. Today directive abstinence programs can be found in many school districts while battles are fought in other school districts for their inclusion or removal. While proponents of abstinence programs run for school board or influence existing school board members, groups like Planned Parenthood bring lawsuits against districts that use abstinence-based curricula arguing that they are inaccurate or incomplete. At least a dozen abstinence- based curricula are on the market, with the largest being *Sex Respect* (Bradley, Illinois) and *Teen-Aid* (Spokane, Washington).

The emergence of abstinence-only programs as an alternative to comprehensive sex education programs was due to both

popularity and politics. Parents concerned about the ineffectiveness of the safe sex message eagerly embraced the message of abstinence. And political funding helped spread the message and legitimize its educational value. The Adolescent Family Life Act enacted in 1981 by the Reagan Administration created Title XX and set aside $2 million a year for the development and implementation of abstinence-based programs. Although the Clinton Administration later cut funding for abstinence programs, the earlier funding in the 1980s helped groups like Sex Respect and Teen-Aid launch abstinence programs in the schools.

Parents and children have embraced the abstinence message in significant numbers. One national poll by the University of Chicago found that 68 percent of adults surveyed said premarital sex among teenagers is “always wrong.” A 1994 poll for USA Weekend asked more than 1200 teens and adults what they thought of “several high profile athletes [who] are saying in public that they have abstained from sex before marriage and are telling teens to do the same.” Seventy-two percent of the teens and 78 percent of the adults said they agree with the pro-abstinence message.

Their enthusiasm for abstinence-only education is well founded. Even though the abstinence message has been criticized by some as naive or inadequate, there are good reasons to promote abstinence in schools and society.

1. Teenagers want to learn about abstinence. Contrary to the often repeated teenage claim, not “everyone’s doing it.” A 1992 study by the Centers for Disease Control found that 43 percent of teenagers (age 14 to 17) had engaged in sexual intercourse at least once. Put another way, the latest surveys suggest that a majority of teenagers are not doing it.

2. Abstinence prevents pregnancy. Proponents of abstinence-only programs argue that it will significantly lower the teenage pregnancy rate and cited lots of anecdotes and

statistics to make their case. For example, the San Marcos Junior High in San Marcos, California, adopted an abstinence-only program developed by Teen- Aid. The curriculum dropped the school's pregnancy rate from 147 to 20 within a two-year period. An abstinence-only program for girls in Washington, D.C., has seen only one of 400 girls become pregnant.

3. Abstinence prevents sexually transmitted diseases (STDs). After more than three decades, the sexual revolution has taken lots of prisoners. Before 1960 there were only two STDs that doctors were concerned about: syphilis and gonorrhea. Today, there are more than 20 significant STDs ranging from the relatively harmless to the fatal. Twelve million Americans are newly infected each year, and 63 percent of these new infections are in people less than 25 years old. Eighty percent of those infected with an STD have absolutely no symptoms.

The conclusion is simple: abstinence is the only truly safe sex.

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Broken Homes, Broken Hearts — A Christian Perspective on Sex Outside of Marriage

Kerby Anderson examines the impact of teen pregnancies on our society from a Christian, biblical worldview perspective. He suggests steps we must take if Christians are to combat this

problem of our American society.

As the family goes, so goes society.

Families are the bedrock of society. When families fall apart, society falls into social and cultural decline. Ultimately the breakdown of the American family is at the root of nearly every other social problem and pathology.

Just a few decades ago, most children in America grew up in intact, two-parent families. Today, children who do so are a minority. Illegitimacy, divorce, and other lifestyle choices have radically altered the American family, and thus have altered the social landscape.

Karl Zinsmeister of the American Enterprise Institute has said, "There is a mountain of scientific evidence showing that when families disintegrate, children often end up with intellectual, physical and emotional scars that persist for life." He continues, "We talk about the drug crisis, the education crisis, and the problem of teen pregnancy and juvenile crime. But all these ills trace back predominantly to one source: broken families."

Broken homes and broken hearts are not only the reason for so many social problems. They are also the reason for the incumbent economic difficulties we face as a culture. The moral foundation of society erodes as children learn the savage values of the street rather than the civilized values of culture. And government inevitably expands to intervene in family and social crises brought about by the breakdown of the family. Sociologist Daniel Yankelovich puts it this way:

> *Americans suspect that the nation's economic difficulties are rooted not in technical economic forces (for example, exchange rates or capital formation) but in fundamental moral causes. There exists a deeply intuitive sense that the success of a market-based economy depends on a highly*

> *developed social morality—trustworthiness, honesty, concern for future generations, an ethic of service to others, a humane society that takes care of those in need, frugality instead of greed, high standards of quality and concern for community. These economically desirable social values, in turn, are seen as rooted in family values. Thus the link in public thinking between a healthy family and a robust economy, though indirect, is clear and firm.*

Illegitimacy is our most important social problem.

One of the most significant factors contributing to the breakdown of the family has been the steady rise of unwed births. Since 1960, illegitimate births have increased more than 400 percent. In 1960, 5 percent of all births were out of wedlock. Thirty years later nearly 30 percent of all births were illegitimate. Among blacks two out of every three births are illegitimate.

To put this astonishing increase in illegitimate births in perspective, compare 1961 with 1991. Roughly the same number of babies were born in both years (about 4 million). But in 1991, five times as many of these babies were born out of wedlock.

Social commentator Charles Murray believes that **"illegitimacy is the single most important social problem of our time—more important than crime, drugs, poverty, illiteracy, welfare or homelessness because it drives everything else."** The public costs of illegitimacy are very high. "Children born out of wedlock tend to have high infant mortality, low birth weight (with attendant morbidities), and high probabilities of being poor, not completing school, and staying on welfare themselves. As a matter of public policy, if not of morality, it pays for society to approve of marriage as the best setting for children, and to discourage having children out of

wedlock."

In her famous article in *Atlantic Monthly* entitled "Dan Quayle Was Right," Barbara Dafoe Whitehead warned Americans of the cost of ignoring the breakdown of the family:

> *If we fail to come to terms with the relationship between family structure and declining child well-being, then it will be increasingly difficult to improve children's life prospects, no matter how many new programs the federal government funds. Nor will we be able to make progress in bettering school performance or reducing crime or improving the quality of the nation's future work force—all domestic problems closely connected to family breakup. Worse, we may contribute to the problem by pursuing policies that actually increase family instability and breakup.*

While speaking of Dan Quayle, it might be wise to remind ourselves of what the former Vice-President said that brought such a firestorm from his critics. While speaking to the Commonwealth Club in San Francisco, Vice President Quayle argued that "It doesn't help matters when prime time TV has Murphy Brown—a character who supposedly epitomized today's intelligent, highly paid, professional woman—mocking the importance of fathers by bearing a child alone, and calling it just another lifestyle choice."

At the time, one would have thought the Vice-President had uttered the greatest blasphemy of our time. Yes, he was using a fictional character to make a point. Yes, he was challenging the tolerant, politically-correct conventions of the time. But he was addressing an important issue neglected by so many.

Fortunately, a year later *Atlantic Monthly* magazine devoted the cover of its April 1993 issue to the story: "Dan Quayle Was Right. After decades of public dispute about so-called family diversity, the evidence from social-science research is coming in: The dissolution of two-parent families, though it

may benefit the adults involved, is harmful to many children, and dramatically undermines our society."

The conclusion should not be startling, yet in a society that no longer operates from a Christian world and life view, it has nearly become front page news. For decades, the United States has engaged in a dangerous social experiment. Two parents are no longer seen as necessary. Stable, intact families are no longer seen as important. We are trying to reinvent the family and are finding out the devastating consequences of illegitimacy, divorce, and other lifestyle choices. As a society, we must return to the values of abstinence, chastity, fidelity, and commitment. Our desire to reject Christian family values has inevitably lead to the decline of Western civilization. It is time to find the road back to home.

The flood of teenage pregnancies is destroying our social fabric.

One of the most significant factors contributing to the breakdown of the family has been the steady rise of unwed births. Since 1960, illegitimate births have increased more than 400 percent. In 1960, 5 percent of all births were out of wedlock. Thirty years later nearly 30 percent of all births were illegitimate. Among blacks two out of every three births are illegitimate.

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One of the driving forces of illegitimacy is births to unmarried teenagers. Every 64 seconds, a baby is born to a

teenage mother, and every five minutes a baby is born to a teenager who already has a child. More than two thirds of these births are to teen girls who are not married.

Becoming a teenage parent significantly decreases the chance that the young mother will be able to complete high school, attend college, and successfully compete for a job. She is much more likely to rear the child in poverty than girls who do not become mothers as teenagers. “When teenagers have babies both mothers and children tend to have problems—health, social, psychological, and economic. Teens who have children out of wedlock are more likely to end up at the bottom of the socio-economic ladder.”

If the increase in teenage pregnancy isn’t disturbing enough, there are other disturbing trends. A growing number of adults are having sex with teens. This is more than just Joey Buttafuoco and Amy Fisher or Woody Allen and Soon-Yi Previn. Social statistics show that adult males are fathers of two thirds of the babies born to teenage girls.

In some ways, this is not a new phenomenon. In 1920, for example, 93 percent of babies born to teenagers were fathered by adults. But the difference is that pregnant teens no longer marry the father. Today, 65 percent of teenage moms are unmarried. Many of these kids are destined to spend a lifetime in a cycle of poverty and welfare dependency.

Why teenage girls become sexually involved with adult males is sometimes difficult to discern. A desire for a mature male and teenage insecurity are significant reasons. Teenage girls from broken homes or abusive homes often are easy prey for adult men, which may explain why adult men seek out teenager girls. In many cases, teen sex is not consensual. Girls under the age of 18 are victims of approximately half the rapes each year.

Stemming the tide of teen pregnancy, and reforming the current welfare system that often encourages it, are important action

points. But doing so must take into account that adult males are a significant reason why teenage girls are becoming pregnant.

Whether we look at the increase in illegitimate births in general or teenage pregnancy in particular, we can see a disturbing trend. In essence, Americans have been conducting a social experiment for the last three decades. And the evidence clearly points to major problems when children are reared in families without two parents. Illegitimate births are part of the reason for the breakdown of the family; divorce is the other.

We must honor and promote sexual abstinence.

Thus far we have been talking about the problems. Now it's time to propose a solution. There are two parts to this approach. First, we must teach sexual abstinence. A fundamental reason for the increase in unwed births is teenage sexual promiscuity. Reduce teenage sexuality and you will reduce illegitimacy. Fortunately, the abstinence message seems to be gaining in popularity and getting the media attention it deserves.

or example, the front page of the Sunday *New York Times* Style section featured the surprising headline: "Proud to Be a Virgin: Nowadays, You Can be Respected Even if You Don't Do It." And the March 1994 issue of *Mademoiselle* featured an article proclaiming "The New Chastity." The article wondered if "saying no to sex might turn out to be the latest stage in the sexual revolution." *Mademoiselle* found that views on sexuality seem to be changing. Virgins, for example, are no longer seen as individuals who are fearful or socially inept. In fact, abstinence is now being equated with strength of will and character. Those once labeled "carefree" are now considered "careless" in light of the AIDS and STDs.

One of the most visible campaign for abstinence has come from the "True Love Waits" campaign by the Southern Baptist Convention (SBC) begun in the spring of 1993. Students pledge: "Believing that true love waits, I make a commitment to God, myself, my family, those I date, my future mate, and my future children to be sexually pure until the day I enter a covenant marriage relationship."

A grassroots movement to promote abstinence through a variety of programs has been spreading throughout the country. Crisis Pregnancy Centers provide speakers to address the issue of abstinence. Untold groups—with names like "Aim for Success" and "Best Friends" and "Athletes for Abstinence"—are spreading the positive message of abstinence to teens who need to hear an alternative to the safe sex message.

There are substantial personal benefits to abstinence. But the greatest benefit to society is a reduction in the illegitimate birth rate which drives nearly all of the social problems discussed in this book.

We must target teen pregnancy.

Now we must address the second part of the problem; that is, we must target teen pregnancy. The problem with teenage sex is not simply that teens are having sex. In approximately half the cases, adults are having sex with teenagers. State laws governing statutory rape are often called a "fictitious chastity belt" since law enforcement often ignore the laws.

The reasons for lax enforcement are varied, but they surely include the fallout from the sexual revolution and the children's rights movement. As a society, we have come to accept the notion that even young teenagers are engaging in consensual sex. While there may be some tawdry publicity when a high profile entertainer like Woody Allen or Kelsey Grammar is accused of sex with a teenager, generally the issue is ignored.

But the issue cannot be ignored. “Welfare reform, sex education and teen pregnancy prevention programs and welfare reform are doomed to failure when they ignore the prevalence of adult-teen sex.” Education about the problem and enforcement of statutory rape laws would substantially reduce the number of unwed teens.

We must honor and promote strong marriages.

Now I would like to propose additional solutions to the problem of family breakdown. First, we must teach marriage principles. Marriages are falling apart and other marriages never begin as sexual partners choose to live together rather than get married. Churches and Christian organizations must teach marriage principles so that marriages will last. Once built on commitment, today’s marriages are a contract: as long as love shall last. Sound, biblical education is necessary to put marriages back on a firm foundation.

Fortunately, a growing number of effective organizations are providing that needed education. Family Life Ministry holds weekend Family Life Conferences through out the country and the world to packed audiences eager to learn more about how to build strong marriages and families. The Marriage Encounter program has been providing the same important teaching in church and retreat settings. And lots and lots of books, tapes, videos, and other seminars are focusing needed attention on the principles that will build strong marriages and allow them to flourish.

We must honor and support fatherhood.

Second, we must emphasize fatherhood. As more and more children grow up in single-parent homes (which are primarily female-headed homes), fathers appear irrelevant and superfluous. Not only are they seen as expendable; they are

often seen as part of the problem.

Yet the consequences of fatherless homes is devastating. “More than 70 percent of all juveniles in state reform institutions come from fatherless homes.” Children who grow up without fathers are more likely to be involved in criminal behavior because they lack a positive male role model in their lives. Fathers are not irrelevant. They may indeed spell the difference between success and failure for their children.

Often fatherless homes feed the cycle of illegitimacy itself. “Young white women who grow up without a father in the home are more than twice as likely to bear children out of wedlock. And boys living in a single-parent family are twice as likely to father a child out of wedlock as boys from intact homes.”

Fortunately, there are many ministries encouraging men to stand with their families. Gatherings like the Promise Keepers conferences nationwide are highly visible symbols of a much greater movement of men (individual churches or parachurch organizations) who have dedicated themselves to running their families on biblical principles. Groups like Mad Dads (Men Against Destruction Defending Against Drugs and Social disorder) have been organized to encourage fathers in high crime urban areas. Especially critical are young urban (often black) youths who do not have strong male role models to emulate. One organizer said, “They saw pimps and hustlers and dope dealers and gang bangers and hypersexual individuals who like to make babies but didn’t assume the responsibility of taking care of them—so why should the kids? And so our first goal was just to mobilize strong, black fathers who were drug-free, who were willing to stand up and be role models, giving our kids another group of men they could look at.”

Building strong families must include building families with fathers. Fatherlessness is one of the primary causes of social disintegration. Parenting cannot be left to mothers and grandmothers. Fathers are essential.

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Safe Sex and the Facts – A Christian Perspective

Dr. Ray Bohlin provides a look at the many problems surrounding the idea of safe sex from a Christian, biblical worldview perspective as well as a scientific perspective. He provides a sound argument for supporting the Christian view of sex being reserved for the marriage relationship.

 *This article is also available in Spanish.*

At age 16 John had sex with Andrea. Just one time. He enjoyed the experience but felt guilty and decided the risk of sexually transmitted diseases (STDs) and pregnancy were just too great. He did not have sex again until nine years later when he married Cindy, who was a virgin. Three months after their wedding Cindy began having painful symptoms. Unknowingly John, who had never had any symptoms of disease, had brought two STDs into his marriage. But John and Cindy were lucky; they both responded to treatment and are healthy today. Many others, however, are not so fortunate. Today STDs are at unprecedented and epidemic proportions. Thirty years of the sexual revolution is paying an ugly dividend, and those most at risk are teenagers. This is true partially because teenagers are more sexually active than ever before, but also because teenage girls are more susceptible to STDs than males or adult females.

While a few STDs can be transmitted apart from sex acts, all are transmissible by the exchange of bodily fluids during intimate sexual contact. I want to discuss the severity of the

problem as well as what must be done if we are to save a majority of the next generation from the shame, infertility, and sometimes death, that may result from STDs.

If you are not aware of some of the following statistics, then prepare to fasten your seat belt because what I have to report is not pretty. The information I am about to share is from data gathered by the Medical Institute for Sexual Health in Austin, Texas.(1) All of these statistics are readily available from reputable medical and scientific journals.

Today, there are approximately 25 STDs. A few can be fatal. Some are relatively harmless, but all are humiliating. Many women are living in fear of what their future may hold as a result of STD infection. It is estimated that 1 in 5 Americans between the ages of 15 and 55 are currently infected with one or more viral STDs, and 12 million Americans are newly infected each year. That’s nearly 5% of the entire population of the U.S.! Of these new infections, 63% involve people less than 25 years old.

This epidemic is a recent phenomenon. Some young people have parents who may have had multiple sexual part-ners with relative impunity and conclude that they too are safe from disease. However, most of these diseases were not around 20 to 30 years ago. Prior to 1960, there were only two prevalent sexually transmitted diseases: syphilis and gonorrhea. Both were easily treatable with antibiotics.

In the sixties and seventies this relatively stable situation began to change. For example, in 1976, chlamydia first appeared in increasing numbers in the U.S. Chlamydia, particularly dangerous to women, is now the most common bacterial STD in the country. In 1981, human immuno-deficiency virus (HIV), the virus which causes AIDS, was identified. By early 1993, between 1 and 2 million Americans were infected with HIV or AIDS, over 12 million were infected worldwide, and over 160,000 had died in the U.S. alone. Then herpes was added

to the mix. This STD now infects 30 million people.

In 1985, human papilloma virus (HPV) began a dramatic increase. This virus can result in venereal warts and will often lead to deadly cancers.

By 1990, penicillin-resistant strains of gonorrhea were present in all fifty states, and by 1992 syphilis was at a 40-year high. As of 1993, pelvic inflammatory disease (PID), which is almost always caused by gonorrhea or chlamydia, was affecting 1 million new women each year. This includes 16,000 to 20,000 teenagers. This infection can result in pelvic pain and infertility and is the leading cause of hospitalization for women between the ages of 15 and 55, apart from pregnancy.

Pelvic inflammatory disease can result in scarred fallopian tubes which block passage of a fertilized egg. The fertilized egg, therefore, cannot pass on to the uterus, and the growing embryo will cause the tube to rupture. From 1960 to 1990 there was a 400% increase in tubal pregnancies, most of which were caused by STDs. Making matters even worse is the fact that 80% of those infected with an STD don’t know it and will unwittingly infect their next sexual partner.

The Medical Facts of STDs

Syphilis is a terrible infection. In its first stage, the infected individual may be lulled into thinking there is little wrong since the small sore will disappear in 2 to 8 weeks. The second and third stages are progressively worse and can eventually lead to brain, heart, and blood vessel damage if not diagnosed and treated. The saddest part is that syphilis is 100% curable with penicillin, yet there is now more syphilis than in the late 1940s, and it is spreading rapidly.

Chlamydia, a disease which only became common in the mid-1980s, infects 20 to 40% of some sexually active groups

including teenagers. In men, chlamydia can cause infertile sperm, a condition reversible with antibiotics. In women, however, the infection is devastating. An acute chlamydia infection in women will result in pain, fever, and damage to female organs. A silent infection can damage a woman's fallopian tubes without her ever knowing it. A single episode of chlamydia PID can result in a 25% chance of infertility. With a second infection, the chance of infertility rises to 50%. This is double the risk of gonorrhea.

Treatment with antibiotics is not always successful. One study reported that 18% showed a recurrence of infection within 3 weeks. As many as 14% of teenagers do not respond to treatment, and ultimately require a hysterectomy. It is an overwhelming burden for an 18- or 19-year- old girl to have to face the fact that she will never be able to bear a single child.

The human papilloma virus (HPV) is an extremely common STD. One study reported that at the University of California, Berkeley, 46% of the sexually active coeds were infected with HPV. Another study reported that 38% of the sexually active females between the ages of 13 and 21 were infected.

HPV is the major cause of venereal warts which are extremely difficult to treat and may require expensive procedures such as laser surgery. HPV can result in pre-cancer or cancer of the genitalia. By causing cancer of the cervix, this virus is presently killing more women in this country than AIDS, or over 4,600 women in 1991. HPV can also result in painful intercourse for years after infection even though other visible signs of disease have disappeared.

And of course there is the human immunodeficiency virus, or HIV, the virus that causes AIDS. The first few cases of AIDS were only discovered in 1981; now, in the U.S. alone, there are between 1 and 2 million infected with this disease. As far as we know, all of these people will die in the next ten to

fifteen years. As of early 1993, approximately 160,000 had already died.

In 1991 a non-random study at the University of Texas at Austin showed that 1 in 100 students who had blood drawn for any reason at the university health center was HIV infected.

While the progress of the disease is slow for many people, all who have it will be infected for the rest of their lives. There is no cure, and many research-ers are beginning to despair of ever coming up with a cure or even a vaccine (as was eventually done with polio). In 1992, 1 in 75 men was infected with HIV and 1 in 700 women. But the number of women with AIDS is growing. In the early years of the epidemic less than 2% of the AIDS cases were women. Now the percentage is 12%.

Teenagers Face Greater Risks from STDs

One of the statistics I have mentioned is that teenagers are particularly susceptible to STDs. This fact is alarming since more teens are sexually active today than ever before. An entire generation is at risk, and the saddest part about it is that most of them are unaware of the dangers they face. Teenagers must be given the correct information to help them realize that saving themselves sexually until marriage is the only sure way to stay healthy.

The medical reasons for teens' high susceptibility to STDs relates specifically to females. The cervix of a teen-age girl has a lining (ectropion) which produces mucus that is a great growth medium for viruses and bacteria. As a girl reaches her 20s or has a baby, this lining is replaced with a tougher, more resistant lining. Also during the first two years of menstruation, 50% of the periods occur without ovulation. This will produce a more liquid mucus which also grows bacteria and viruses very well. A 15-year-old girl has a 1-in-8 chance of developing pelvic inflammatory disease simply by having sex,

whereas a 24-year-old woman has only a 1- in-80 chance in the same situation.

Teenagers do not always respond to antibiotic treatment for pelvic inflammatory disease, and occasionally such teenage girls require a hysterectomy. Infertility is an increasing problem in our society. It is estimated that one-fourth to one-third of all female infertility in marriage is a result of STDs.

Teenagers are also more susceptible to human papilloma virus, HPV. Rates of HPV infection in teenagers can be as high as 40%, whereas in the adult population, the rate is less than 15%. Teenagers are also more likely to develop precancerous growths as a result of HPV infection than adults. These precancerous growths in teenagers are also more likely to develop into invasive cancer than in adults.

Apart from the increased risk from STDs in teens, teen-age pregnancy is also at unprecedented levels. In 1985 there were over 1 million teen-age pregnancies; 400,000 of these ended in abortion. Abortion is not a healthy procedure for anyone to undergo, but this is especially true for a teenager. Not getting pregnant to begin with is far better. Oral contraceptives are not as effective with teenagers, mainly because teens are more apt to forget to take the pill. Over a one-year period, as many as 9 to 18% of teenage girls using oral contraceptives become pregnant.

Finally, when teenagers start having sex earlier in life, they are much more likely to have multiple sexual partners, a behavior that puts them at greater risk for STD. When teenagers become sexually active before they are 18 years of age, 75% of them will have more than 2 partners and 45% of them will have 4 or more partners. If sexual activity begins after the 19th birthday, only 20% will have 2 or more partners and only 1% will have 4 or more partners. (These statistics were reported by the Centers for Disease Control after

interviewing people in their 20s.)

Is Safe Sex Really the Answer?

I must now take a hard look at the message of safe sex which is being taught to teens at school and through the media.

Some people believe that if teens can be taught how to use contraception and condoms effectively, rates of pregnancy and STD infection will be reduced dramatically. But common sense and statistics tell us otherwise. At Rutgers University, the rates of infection of students with STD varied little with the form of contraception used. For example, 35 to 44% of the sexually active students were infected with one or more STDs whether they used no contraceptive, oral contraceptive, the diaphragm, or condoms. It is significant to note that condoms, the hero of the safe sex message, provided virtually no protection from STDs.

Will condoms prevent HIV infection, the virus that causes AIDS? While it is better than nothing, the bottom line is that condoms cannot be trusted. A study from Florida looked at couples in which one partner was HIV positive and the other was negative. They used condoms as protection during intercourse. After 18 months, 17% of the previously uninfected partners were HIV positive. That is a one-in-six chance, the same as in Russian roulette.

Condoms do not even provide 100% protection for the purpose for which they were designed: prevention of pregnancy. One study from the School of Medicine Family Planning Clinic at the University of Pennsylvania reported that 25% of patients using condoms as birth control conceived over a one-year period. Other studies indicate that the rate of accidental pregnancy from condom-protected intercourse is around 15% with married couples and 36% for unmarried couples.

Condoms are inherently untrustworthy. The FDA allows as many

as one in 250 to be defective. Condoms are often stored and shipped at unsafe temperatures which weakens the integrity of the latex rubber causing breaks and ruptures. Condoms will break 8% of the time and slip off 7% of the time. There are just so many pitfalls in condom use that you just can’t expect immature teenagers to use them properly. And even if they do, they are still at risk.

Studies are beginning to show that school-based sex education that includes condom use as the central message, does not work. A study in a major pediatric journal concluded that the available evidence indicates that there is little or no effect from school-based sex- education on sexual activity, contraception, or teenage pregnancy.(2) This study evaluated programs that emphasized condoms. In addition, programs that emphasize condoms tend to give a false sense of security to sexually active students and make those students who are not having sex feel abnormal.

The list of damages from unmarried adolescent sexual activity is long indeed. Apart from the threat to physical health and fertility, there is damage to family relationships, self-confidence and emotional health, spiritual health, and future economic opportunities due to unplanned pregnancy. Condom-based sex- education does not work.

Saving Sex for Marriage is the Common Sense Solution.

The epidemic of sexually transmitted diseases is running rampant in this country and around the world. Diseases such as chlamydia, human papilloma virus, herpes, hepatitis B, trichomonas, pelvic inflammatory disease, and AIDS have joined syphilis and gonorrhea in just the last 30 years. There is no question that the fruits of the sexual revolution have been devastating. I have also shown how our teen-agers are at a greater risk for sexually transmitted diseases than are adults

and that sex-education based on condom use is ineffective and misleading. There is only one message that offers health, hope, and joy to today's teenagers. We need to teach single people to save intercourse for marriage.

Sex is a wonderful gift, but if uncontrolled, it has a great capacity for evil as well as good. Our bodies were not made to have multiple sex partners. Almost all risk of STD and out-of-wedlock pregnancy can be avoided by saving intercourse for marriage. And it can be done.

Statistics show clearly that in schools that teach a sex education program that emphasizes saving intercourse for marriage, the teen pregnancy rate drops dramatically in as little as one year. In San Marcos, California, a high school used a federally funded program ("Teen Aid") which emphasizes saving intercourse until marriage. Before using the program there were 147 pregnancies out of 600 girls. Within two years, the number of pregnancies plummeted to 20 out of 600 girls.(3) As of 1992, San Marcos was still using this program and was still satisfied with it. In Jessup Georgia, upon instituting the "Sex Respect" program, the number of pregnancies out of 340 female students dropped from 17 to 13 to 11 to 3 in successive years.

Delaying intercourse until teens are older is not a naive proposal. Over 50% of the females and 40% of the males between 15 and 19 have not had intercourse. They are living proof that teens can control their sexual desires. Of those who had at least one sexual experience, 20% had sex in the past but were not currently sexually active. Therefore, a minority of students are sexually active.

Condom-based sex-education programs basically teach teen-agers that they cannot control their sexual desires, and that they must use condoms to protect themselves. It is not a big leap from people being unable to control their sexual desires to being unable to control their hate, greed, anger, and

prejudice. This is not the right message for our teenagers!

Teenagers are willing to discipline themselves for things they want and desire and are convinced are beneficial. Girls get up early for drill team practice. Boys train in the off-season with weights to get stronger for athletic competition. Our teens can be disciplined in their sexual lives if they have the right information to make logical choices.

Saving sex for marriage is the common sense solution. In fact, it is the only solution. We don't hesitate to tell our kids not to use drugs or marijuana, and most do not. We tell our kids it's unhealthy to smoke, and most do not.

It is normal and healthy not to have sex until marriage. STDs are so common that it is not an exaggeration to say that most people who regularly have sex outside of marriage will contract a sexually transmitted disease. Our sexuality should blossom within the confines of a mutually faithful monogamous relationship. We need to reeducate our kids not just in what is healthy, but in what is right.

Notes

1. Medical Institute for Sexual Health, P.O. Box 4919, Austin, TX 78765.

2. I.W. Stout, et al., *Pediatrics*, 1989, 83:376-79.

3. Joe S. McIlhaney, Jr., Safe Sex (Grand Rapids, Mich.: Baker Book House, 1991), p. 86.

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The Epidemic of Sexually Transmitted Diseases – A Christian Solution

Written by Dr. Ray Bohlin

Dr. Bohlin looks at data describing the huge increase in STDs in American, considers the causes of this increase, and proposes a Christian solution firmly rooted in a biblical worldview.

An STD Epidemic

Sexually Transmitted Diseases (or STDs) are at unprecedented and epidemic proportions. Thirty years of the sexual revolution is paying an ugly dividend. While a few STDs can be transmitted apart from sex acts, all are transmissible by the exchange of bodily fluids during intimate sexual contact. I want to discuss the severity of the problem as well as what must be done if we are to save a majority of the next generation from the shame, infertility, and sometimes death, that may result from STDs.

The information I am about to share is from data gathered by the Medical Institute for Sexual Health out of Austin, Texas.(1) All of these statistics are readily available from reputable medical and scientific journals.

Today, there are approximately 25 STDs. A few can be fatal. Many women are living in fear of what their future may hold as a result of STD infection. It is estimated that 1 in 5 Americans between the ages of 15 and 55 are currently infected with one or more STDs, and 12 million Americans are newly infected each year. That’s nearly 5% of the entire population of the U.S. Of these new infections, 63% are in people less than 25 years old.

This epidemic is a recent phenomenon. Some young people have parents who may have had multiple sexual partners with relative impunity. They may conclude that they too are safe from disease. However, most of these diseases were not around 20 to 30 years ago. Prior to 1960, there were only two significant sexually transmitted diseases: syphilis and gonorrhea. Both were easily treatable with antibiotics. In the sixties and seventies this relatively stable situation began to change. For example, in 1976, chlamydia first appeared in increasing numbers in the United States. Chlamydia, particularly dangerous to women, is now the most common STD in the country. Then in 1981, human immunodeficiency virus (HIV), the virus which causes AIDS, was identified. By early 1993, between 1 and 2 million Americans were infected with AIDS, over 12 million were infected worldwide, and over 160,000 had died in the U.S. alone. Over 10% of the total U.S. population, 30 million people, are infected with herpes.

In 1985, human papilloma virus (HPV), began to increase. This virus will result in venereal warts and will often lead to deadly cancers. In 1990, penicillin resistant-strains of gonorrhea were present in all fifty states.

By 1992 syphilis was at a 40-year high. As of 1993, pelvic inflammatory disease (PIV), which is almost always caused by gonorrhea or chlamydia, was affecting 1 million new women each year. This includes 16,000 to 20,000 teenagers. This complication causes pelvic pain and infertility and is the leading cause of hospitalization for women, apart from pregnancy, during the childbearing years.

Pelvic inflammatory disease can result in scarred fallopian tubes which block the passage of a fertilized egg. The fertilized egg, therefore, cannot pass on to the uterus and the growing embryo will cause the tube to rupture. By 1990, there was a 400% increase in tubal pregnancies, most of which were caused by STDs. Even worse is the fact that 80% of those infected with an STD don’t know it and will unwittingly infect

their next sexual partner.

The Medical Facts of STDs

Syphilis is a terrible infection. In its first stage, the infected individual may be lulled into thinking there is little wrong since the small sore will disappear in 2 to 8 weeks. The second and third stages are progressively worse and can eventually lead to brain, heart, and blood vessel damage if not diagnosed and treated. The saddest part is that syphilis is 100% curable with penicillin, yet there is now more syphilis than since the late 1940s, and it is spreading rapidly.

Chlamydia, a disease which only became common in the mid-1970s, infects 20 to 40% of some sexually active groups including teenagers. In men, chlamydia is usually less serious; with females, however, the infection can be devastating. An acute chlamydia infection in women will result in pain, fever, and damage to female organs. A silent infection can damage a woman’s fallopian tubes without her ever knowing it. A single chlamydia infection can result in a 25% chance of infertility. With a second infection, the chance of infertility rises to 50%. This is double the risk of gonorrhea.

The human papilloma virus, or HPV, is an extremely common STD. One study reported that at the University of California, Berkeley, 46% of the sexually active coeds were infected with HPV. Another study reported that 38% of the sexually active females between the ages of 13 and 21 were infected. HPV is the major cause of venereal warts; it can be an extremely difficult problem to treat and may require expensive procedures such as laser surgery.

The human papilloma virus can result in precancer or cancer of the genitalia. By causing cancer of the cervix, this virus is killing more women in this country than AIDS, or over 4,600

women in 1991. HPV can also result in painful intercourse for years after infection even though other visible signs of disease have disappeared.

And of course there is the human immunodeficiency virus, or HIV, the virus that causes AIDS. The first few cases of AIDS were only discovered in 1981; now, in the U.S. alone, there are between 1 and 2 million infected with this disease. As far as we know, all of these people will die in the next ten years. As of early 1993, 160,000 had already died.

A 1991 study at the University of Texas at Austin showed that 1 in 100 students who had blood drawn for any reason at the university health center was HIV infected. While the progress of the disease is slow for many people, all who have the virus will be infected for the rest of their life. There is no cure, and many researchers are beginning to despair of ever coming up with a cure or even a vaccine (as was eventually done with polio). In 1992, 1 in 75 men was infected with HIV and 1 in 700 women. But the number of women with AIDS is growing. In the early years of the epidemic less than 2% of the AIDS cases were women. Now the percentage is 12%.

Teenagers Face a Greater Risk from STDs

Teenagers are particularly susceptible to sexually transmitted diseases or STDs. This fact is alarming since more teens are sexually active today than ever before. An entire generation is at risk and the saddest part about it is that most of them are unaware of the dangers they face. Our teenagers must be given the correct information to help them realize that saving themselves sexually until marriage is the only way to stay healthy.

The medical reasons for teens' high susceptibility to STDs specifically relates to females. The cervix of a teenage girl has a lining which produces mucus that is a great growth medium for viruses and bacteria. As a girl reaches her 20s or

has a baby, this lining is replaced with a tougher, more resistant lining. Also during the first two years of menstruation, 50% of the periods occur with-out ovulation. This will produce a more liquid mucus which also grows bacteria and viruses very well. A 15-year-old girl has a 1-in-8 chance of developing pelvic inflammatory disease simply by having sex, whereas a 24-year-old woman has only a 1- in-80 chance in that situation.

Teenagers do not always respond to antibiotic treatment for pelvic inflammatory disease, and occasionally such teenage girls require a hysterectomy. Teenage infertility is also an increasing problem. In 1965, only 3.6% of the married couples between ages 20 and 24 were infertile; by 1982, that figure had nearly tripled to 10.6%. The infertility rate is surely higher than that now with the alarming spread of chlamydia.

Teenagers are also more susceptible to human papilloma virus, HPV. Rates of HPV infection in teenagers can be as high as 40%, whereas in the adult population, the rate is less than 15%. Teenagers are also more likely than adults to develop precancerous growths as a result of HPV infection, and they are more likely to develop pelvic inflammatory disease.

Apart from the increased risk from STDs in teens, teenage pregnancy is also at unprecedented levels, over 1 million pregnancies, and 400,000 abortions in 1985. Abortion is not a healthy procedure for anyone to undergo, especially a teenager. It is far better to have not gotten pregnant. Oral contraceptives are not as effective with teenagers, mainly because teens are more apt to forget to take the pill. Over a one-year period, as many as 9 to 18% of teenage girls using oral contraceptives become pregnant.

Our teenagers are at great risk. In a society that has abandoned God’s design for healthy meaningful sexual expression within marriage, our children need to be told the truth about the dangers of STDs.

Is “Safe Sex” Really the Answer?

I must now take a hard look at the message of “safe sex” which is being taught to teens at school and through the media across the country.

Some people believe that if teens can be taught how to use contraception and condoms effectively, that rates of pregnancy and STD infection will be reduced dramatically. But the statistics and common sense tell us otherwise. At Rutgers University, the rates of infection of students with STD varied little with the form of contraception used. For example, 35 to 44% of the sexually active students were infected with one or more STDs whether they used no contraceptive, oral contraceptive, the diaphragm, or condoms. It is significant to note that condoms, the hero of the “safe sex” message, provided virtually no protection from STDs.

Will condoms prevent HIV infection, the virus that causes AIDS? While it is better than nothing, the bottom line is that condoms cannot be trusted. A study from Florida looked at couples where one individual was HIV positive and the other was negative. They used condoms as protection during intercourse. Obviously these couples would be highly motivated to use the condoms properly, yet after 18 months, 17% of the previously uninfected partners were now HIV positive. That is a one-in-six chance, the same as in Russian roulette. Not good odds!

Condoms do not even provide 100% protection for the purpose for which they were designed: prevention of pregnancy. One study from the School of Medicine Family Planning Clinic at the University of Pennsylvania reported that 25% of patients using condoms as birth control conceived over a one-year period. Other studies indicate that the rate of accidental pregnancy from condom-protected intercourse is around 15% with married couples and 36% for unmarried couples.

Condoms are inherently untrustworthy. The FDA allows one in 250 to be defective. Condoms are often stored and shipped at unsafe temperatures which weakens the integrity of the latex rubber causing breaks and ruptures. Condoms will break 8% of the time and slip off 7% of the time. There are just so many pitfalls in condom use that you just can't expect immature teenagers to use them properly. And even if they do, they are still at risk.

Studies are beginning to show that school-based sex education that includes condom use as the central message does not work. A study in a major pediatric journal concluded that "the available evidence indicates that there is little or no effect from school-based sex-education on sexual activity, contraception, or teenage pregnancy."(2) This study evaluated programs that emphasized condoms. Over $3 billion dollars has been spent on sex- education programs emphasizing condoms with little or no effect! In addition, programs that emphasize condoms tend to give a false sense of security to sexually active students and make those students who are not having sex feel abnormal. Hardly the desired result!

The list of damages from unmarried adolescent sexual activity is long indeed. Apart from the threat to physical health and fertility, there is damage to family relationships, self-confidence and emotional health, spiritual health, and future economic opportunities due to unplanned pregnancy. Condom-based sex-education does not work.

Saving Sex for Marriage is the Common Sense Solution.

I have been discussing the epidemic of sexually transmitted diseases that is running rampant in this country and around the world. Diseases such as chlamydia, human papilloma virus, herpes, hepatitis B, trichomonas, pelvic inflammatory disease, and AIDS have joined syphilis and gonorrhea in just the last

30 years. There is no question that the fruits of the sexual revolution, or sexual convulsion as one author put it, have been devastating. I have also shown how our teenagers are at a greater risk for sexually transmitted diseases than are adults and that sex-education based on condom use is ineffective and misleading. There is only one message that offers health, hope, and joy to today's teenagers. We need to teach single people to save intercourse for marriage.

Sex is a wonderful gift, but if uncontrolled, it has a great capacity for evil as well as good. Our bodies were not made to have multiple sex partners. Almost all risk of STD and out of wedlock pregnancy can be avoided by saving intercourse for marriage. And it can be done.

Statistics show clearly that in schools that teach a sex education program that emphasizes saving intercourse for marriage, the teen pregnancy rate drops dramatically in as little as one year. In San Marcos, California, a high school used a federally funded program ("Teen Aid") which emphasizes saving intercourse until marriage. Before using the program there were 147 pregnancies out of 600 girls. Within two years, the number of pregnancies plummeted to 20 out of 600 girls.(3) In Jessup, Georgia, upon instituting the "Sex Respect" program, the number of pregnancies out of 340 female students dropped from 17 to 13 to 11 to 3 in successive years.

Delaying intercourse until teens are older is not a naive proposal. Over 50% of the females and 40% of the males ages 15 to 19 have not had intercourse. While not a majority, they are living proof that teens can control their sexual desires. Current condom-based sex-education programs basically teach teenagers that they cannot control their sexual desires, and that they must use condoms to protect themselves. It is not a big leap from teenagers being unable to control their sexual desires to being unable to control their hate, greed, anger, and prejudice. This is not the right message for our teenagers! Teenagers are willing to discipline themselves for

things they want and desire and are convinced are beneficial. Girls get up early for drill team practice. Boys train in the off-season with weights to get stronger for athletic competition. Our teens can also be disciplined in their sexual lives if they have the right information to make logical choices. Saving sex for marriage is the common sense solution. In fact, it is the only solution. We don't hesitate to tell our kids not to use drugs, and most don't. We tell our kids it's unhealthy to smoke, and most do not. We tell our kids not to use marijuana, and most do not.

It is normal and healthy not to have sex until marriage. Sexually transmitted diseases are so common that it is not an exaggeration to say that most people who regularly have sex outside of marriage will contract a sexually transmitted disease. Not only is saving sex for marriage the only real hope for sexual health, it is God's design. God has said that our sexuality is to blossom within the confines of a mutually faithful monogamous relationship. What we are seeing today is the natural consequence of disobedience. We need to reeducate our kids not just in what is best, but in what is right.

Notes

1. Medical Institute for Sexual Health, P.O. Box 4919, Austin, TX 78765.

2. I.W. Stout, et al., *Pediatrics*, 1989, 83:376-79.

3. Joe S. McIlhaney, Jr., *Safe Sex* (Grand Rapids, Michigan; Baker Book House, 1991), p. 86.

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