

CHOOSING TO BE DISEASE FREE

from the

ABSTINENCE BY CHOICE SERIES

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CHOOSING TO BE DISEASE FREE
Tape #2 from the ABSTINENCE BY CHOICE Series
Viewing Time: 21:26
Grade Level 8 - 12

INTRODUCTION

Choosing To Be Disease Free is Part Two in the *Abstinence by Choice* Series targeted to grades 8 - 12. Although each program is self-contained and can stand alone as a lesson, it is most effective when used as an entire series.

In the late 1960s and early 1970s, the Sexual Revolution helped society gain a more open and positive attitude towards sexuality. However, this newfound openness also caused a decline in sexual responsibility and commitment. Sex was no longer viewed as having serious life implications and consequences. As a result, we see a plague of problems stemming from the breakdown of sexual morality, including: unwed pregnancies, abortions, sexually transmitted diseases, emotional problems and sexual abuse.

For the past two decades, the nondirective approach to encourage teens to make their own decision has not been enough to curb these problems. As a result, abstinence sexuality education—a directive approach—emerged to demonstrate the importance of providing guidance to young people about which sexual decisions are in their best interest. With the belief that young people can and do respond positively to instruction that is well reasoned and supported by evidence, abstinence education promotes abstinence as the healthiest and preferred lifestyle for adolescents.

It is our belief that whether young people have a sexual history or not, that from this point on they have the ability to choose abstinence and remain abstinent until they are in a permanent, committed relationship.

LINKS TO CURRICULUM STANDARDS

The content of this program conforms to the curriculum standards required in the Medical Institute for Sexual Health's National Guidelines for Sexuality & Character Education and the American Cancer Society's National Health Education Standards.

SUMMARY OF THE VIDEO

Today's teens face a world filled with more numerous and dangerous sexually transmitted diseases than ever before. In the face of these escalating risks, factual medical information about STDs is critical for the health and safety of teens. Pam Stenzel uses straightforward, honest discussion to explain in detail the hazards of sexual activity for teens, and to emphasize that because no form of protection is 100 percent effective, the safest choice is abstinence.

WHO IS PAM STENZEL?

For years, Pam Stenzel was on the "front lines" as director of a counseling center for women undergoing crisis pregnancies. Her experiences taught her that before teen pregnancies and STD rates could decline, teen attitudes toward sex had to change first. Desiring to bring about that change, Pam started speaking full-time and has spoken to well over 250,000 young people about issues of sexuality and the importance of abstinence.

FACILITATOR PREPARATION

Read all the material presented in this Facilitator's guide that refers to Tape #2, *Choosing To Be Disease Free*, and preview the video. Review Blackline Masters 1 - 23 and duplicate those you intend to use. For an activity after the video presentation, obtain enough 3x5 cards for each participant. On one side of the card, write an STD—HIV, herpes, chlamydia, and HPV. On several of the cards, leave them blank. These will be handed out to the participants under question #6b in the *Discussion Questions and Follow-up Activities* section of this facilitator's guide.

INSTRUCTIONAL NOTES

Before presenting this lesson to your audience, we suggest that you preview the video and review this guide and the accompanying blackline master activities in order to familiarize yourself with their content.

As you review the materials presented in this guide, you may find it necessary to make some changes, additions, or deletions to meet the specific needs of your class. We encourage you to do so, for only by tailoring this program to your class will they obtain the maximum instructional benefits afforded by the materials.

It is also suggested that the video presentation take place before the entire group under your supervision. The lesson activities grow out of the context of the video; therefore, the presentation should be a common experience for all participants.

PRE-TEST

Hand out the **Pre-Test** which is **Blackline Master #1**. This is designed to be used as an assessment tool before you launch the lesson. It may also be contrasted with the Post-Test to measure audience comprehension of the Objectives.

INTRODUCING THE VIDEO

We have purposely avoided the topic of condom use. Condoms, even if used correctly and consistently, cannot give a 100 percent guarantee, and offers almost no protection against HPV infections. Individuals can have a 100 percent guarantee **only** if they avoid sex until a permanent, committed relationship and if their partner is not infected. We believe that given the factual medical information and tools they need, teens can indeed make the choice for sexual abstinence. And, to those who have a sexual history, it is our desire to see that they are tested, given the medical attention if needed, and provided with the opportunity from this point on, to make a choice for abstinence.

Hand out **Blackline Master #2, Survey**. Ask the participants to

conduct a survey of ten of their peers—five girls and five guys. To obtain accurate results, it is important to make sure they ask ten of their peers that have **not yet been surveyed**. With ease of compilation in mind, most of the answers can be circled. The others require only a number to be recorded. For each question, have the participants compile separate totals for **female** and **male** responses. This survey is designed not only to gauge the STD awareness level of their peer group, but also to accentuate gender differences. Make sure you assign a date when the survey should be completed. Upon completion, have the participants turn in their surveys. On **Blackline Master #3, Results of Survey**, compile and record for each question, the **overall average**, **female average**, and **male average**. Then, make copies to be distributed to each of the participants for class discussion. Lead a discussion based on the following:

1) Which questions were the answers comparable between guys and girls? Which questions showed the greatest differences between guys and girls? Why do you think the responses between guys and girls in these questions showed such a contrast? Why do you think some of the responses were alike? What are the implications?

2) Which of the responses do you think are accurate? Which responses do you think are inaccurate?

3a) How many STDs do you think there are?

There are over 20.

3b) How close is the respondents' average total to this amount? the female total? the male total? How many STDs can you name?

List their answers on the board. Here is a list of the most common STDs that are included in the facilitator's guide: AIDS/HIV, bacterial vaginosis or BV, candidiasis, chlamydia, gonorrhea, hepatitis B, genital herpes or herpes, human papillomavirus or HPV or genital warts, nonspecific urethritis, pubic lice or crabs, scabies, syphilis, and trichomoniasis

- 4) How informed are your peers about the subject of STDs and its risks? How informed do you think you are?
- 5) Were your peers comfortable about the topic of sex and STDs? Were you comfortable talking about the topic?
- 6) What was the reaction of your peers to the idea of sexual abstinence? Do **you** think abstinence is a viable option? Why or why not?
- 7) Explain to the participants that they will be watching a video about the benefits of sexual abstinence and the possible consequences of sexual activity outside of a permanent, committed relationship.
- 12) Before viewing the video, hand out **Blackline Master #4, Choosing to be Disease-Free Viewing Guide**, for the participants to take notes as they view, so that they can better participate in the discussion.

AUDIENCE OBJECTIVES

After viewing the video and participating in the lesson activities, the participants will be able to...

- Define and discuss recycled virginity.
- Identify and discuss the benefits of sexual abstinence.
- Identify the major bacterial and viral STDs, describe how they are transmitted, and identify the possible symptoms, treatment, curability and possible complications.
- Identify those individuals who are at risk of having contracted an STD and need to be tested.
- Identify the available options for STD testing.
- Describe how contracting an STD can affect their future goals.

VIEW THE VIDEO

Viewing time is 21:26.

DISCUSSION QUESTIONS AND FOLLOW-UP ACTIVITIES

After viewing the video, lead a discussion with your group based on the following: (The answers appear in italics.)

1) What is meant by sexual abstinence?

Emphasize that this means avoiding intercourse as well as any activity involving genital contact or genital stimulation.

2) What is meant by recycled virginity?

Despite a person's sexual history, he or she can choose from this point on to abstain from sex.

3) Emphasize to the participants that making the choice to abstain from sex is a tough choice. Ask the group for reasons why this choice can be so difficult.

Some possible answers are: hormones, peer pressure, desire for love and affection, media influences, etc.)

4) Explain to the participants that although there may be some tough times in abstaining from sexual activity until a permanent, committed relationship that there are many more benefits—both physical and emotional. Hand out **Blackline Master #5, The Benefits of Choosing Abstinence**. Divide participants into smaller groups and have them discuss each of the benefits listed on Blackline Master #5 and then list additional benefits and record them on Blackline Master #5. For a fun activity to further reinforce the positive benefits of sexual abstinence, have the groups each create an acrostic by choosing a word or phrase that begins with each letter in the word abstinence which shows the importance of making positive sexual choices. Upon completion, have the groups share their acrostics with the rest of the group.

5) Emphasize to the group that **abstaining from sexual activity until a permanent, committed relationship is the only 100 percent way to avoid the risk of contracting a sexually transmitted disease**. Ask the group to define a sexually transmitted

disease—an STD.

Simply stated it is an infection that is passed from one person to another during sexual activity.

6a) Explain that when people have sex, they become exposed to the STDs of all the people with whom their partner has ever had sex— unless the partner has, for certain, been cured. This concept can be illustrated by the following activity.

6b) Hand out the 3x5 cards that you prepared prior to the video presentation(see **Facilitator Preparation** on page 2). Hand out one card to each of the participants. Explain to the group that they must go to four people and ask them two questions, such as: "What is your favorite food, color, or hobby?" Do **not** have them write down their answers. After they answer the questions, have them show each other their 3x5 card. If they are both blank, they can move on to the next person. If one has a disease, however, the person without a disease must now write that disease on his or her card. If both have diseases and they are different, each must write the other person's disease on their card. If both have the same disease, they can move on to the next person. After exchanging information with four people, they can go back to their seats and wait for the others to finish the activity.

6c) Upon completion of the activity, lead a discussion by asking the following questions:

1. What were your feelings when you had to write a disease on your card?
2. How did you feel about going to the next person knowing what was on your card?
3. Is there anyone who is disease-free? (from this exercise)
4. What did you have in the beginning and what do you have now?
5. What connection can you make from this exercise and real life?

7) Hand out **Blackline Master #6, STD Fact Sheet, and Blackline Master #7, STD Exercise**. Using Blackline Master #6 as a reference, have the participants answer all the questions on

Blackline Master #7. This can be completed either in the classroom or as a homework assignment. For review and clarification, correct the assignments together as a group. Read each question aloud and give the correct answers.

8) Next, hand out **Blackline Masters #8 - 13, Quick Reference Guide to Sexually Transmitted Diseases, and Blackline Masters #14 - 15, Identifying STDs (Part One and Part Two)**. Using Blackline Masters #8 - 14, have the participants answer the questions on Blackline Masters #15 - 16. As in the prior exercise, this can be completed in the classroom or as a homework assignment. Upon completion, correct the assignments together as a group. Read each question aloud and give the correct answers. This is a comprehensive assignment and reviewing the answers in class will help participants gain better comprehension of the STDs and the symptoms, causes, transmission, treatment and complications. **Encourage the participants to hold on to these reference pages.**

9) Hand out **Blackline Master #16, Getting Tested and Treated**. Lead a discussion based on the following questions. The question or phrase that is listed on Blackline Master #16 will be underlined below.

1. Who is at risk?

Emphasize the importance of getting tested if there has been any sexual contact at all—that includes any genital contact.

2. Dangerous Assumptions:

a. "I am better off not knowing." Why is this dangerous?

There can be serious consequences from untreated STDs. If people know they are infected, they can be treated and sometimes cured.

b. "Nothing can happen to me." Why is this assumption inaccurate?

Everyone who has sexual contact is at risk for contracting an STD unless both partners have never had any other sexual contact..

c. "My girlfriend or boyfriend told me he or she is disease-free."

What could be dangerous about this statement?

Some people may lie to get sex. In many cases, an infected persons will not have any symptoms and may unintentionally pass the infection to their partner(s).

d. "Neither of us has ever had sex with anyone else." Why could this be a dangerous statement? Do you have enough trust in this person to risk your health?

Once again, some people may lie to get sex. Another reason could be that the individuals have never had penetrative sex, but have had some kind of genital contact with others.

3. Why should I get tested?

Emphasize that not only is this information necessary for your health, but for the health of future partners as well. It is unfair to use ignorance as an excuse to continue to infect and hurt others.

4. Where can I get tested? What are your options?

The options are listed. Emphasize that they should look over the benefits and drawbacks as well as their support system before they make a decision on the best place to get testing.

5. What are the benefits/drawbacks of seeing a family physician or O.B. Gynecologist?

The cost will be higher for this option, but is billable if the individual's family has insurance. The other consideration is that the physician will follow-up the testing with results and ensure proper treatment if necessary.

6. What are the benefits/drawbacks of contacting a county health department?

The fees are negotiable, depending on each individual's financial situation. They will not refuse services if a person cannot afford to pay for their services. Since the testing is confidential, the individual will most likely have to take the initiative to call for test results.

10) Because STD testing procedures and costs may vary from state to state, it would be helpful for the participants to have the

necessary information from their own community. Hand out **Blackline Master #17, STD Testing in My Community**. Note: Depending on the size of your group and the number of clinics in the area, you may want to divide the participants into groups so that the local clinics and health departments in a smaller community are not bombarded with calls.

11a) Hand out **Blackline Master #18, Think about Your Future**. Have the participants think about and write down what they expect be doing one year from now, three years from now, five years from now, and ten years. Upon completion, lead the following discussion.

11b) If you were to contract an STD, how could this affect your future in the areas listed in Blackline Master #18?

Look for answers such as there may be financial strain for the parent(s) or the one who has contracted the STD. Emphasize that if the STD is not curable, it may be necessary to be treated many times. Their grades may suffer because of a loss of focus during this stressful time and may affect their educational goals, which can then affect their career. In addition, those who have contracted an STD may be experiencing considerable stress and a possible lowering of their self-esteem from contracting an STD. As a result, their relationships with family and friends may suffer. Those who have contracted an STD may also experience a declining interest in hobbies and extracurricular activities. Future relationships will also be affected—those who have contracted an incurable STD will most likely pass on the infection to their future partner(s).

12) Hand out **Blackline Master #19, Abstinence Treaty**. Explain to the participants that this treaty is something they can choose to do with a close friend who has the same resolve about abstinence. Since this is a private and very important decision, the treaty should be signed in a private environment outside the classroom. Participants do not need to turn in their signed treaties, nor share them with anyone else. It is their decision.

13) Hand out **Blackline Masters # 20-21, Quiz. (Parts One and Two)**. Go over the quiz with the participants to see if they have any

questions before beginning. Have the participants complete all of the questions. This tool will help you assess participant comprehension of the Audience Objectives.

EXTENDED ACTIVITIES

Because the statistics on STDs change from year to year, we have purposely avoided using many statistics in this facilitator's guide. In order to get the current statistical information on STDs, involve the participants in a research project. Using **Blackline Master #22, Current STD Statistics**, have the participants research and record the current statistics for each of the STDs listed. The Centers for Disease Control is an unbiased, important source for updated STD information. The participants may use this resource or any other reliable source to complete this activity. The address, phone number and fax number of the Centers for Disease Control is also listed on Blackline Master #23.

BLACKLINE MASTERS

- #1 - Pre-Test
- #2 - Survey
- #3 - Results of Survey (facilitator copy)
- #4 - Viewing Guide
- #5 - The Benefits of Abstinence
- #6 - STD Fact Sheet
- #7 - STD Exercise
- #8 - 13 - Quick Reference Guide to Sexually Transmitted Diseases.
- #14 - Identifying STDs (Part One)
- #15 - Identifying STDs (Part Two)
- #16 - Getting Tested and Treated
- #17 - STD Testing in My Community
- #18 - Think about Your Future
- #19 - Abstinence Treaty
- #20 - Quiz (part one)
- #21 - Quiz (part two)
- #22 - Current STD Statistics

ANSWER KEY

BLACKLINE MASTER #1: PRE-TEST

True or False:

1. false - Only about 30 percent are curable.
2. false - Sexual intercourse is an efficient means of transmission, but STDs can also be spread by genital contact.
3. false - There are much more serious consequences for females.
4. true
5. false - It only takes one infected person to pass on an STD.
6. true
7. false - There are often no visible symptoms.
8. true
9. true
10. true
11. true
12. false - There are over twenty known STDs.
13. true

14. false - If both partners are free of STDs at the beginning of a permanent, committed relationship, there is no risk of infection.
15. true - Chlamydia has been linked to cervical cancer in women and hepatitis B has been linked to liver cancer.
16. false - There are often no symptoms.
17. true - An example is herpes.
18. false - There must be genital contact with an infected person to contract an STD.
19. true
20. true

BLACKLINE MASTER #7: STD EXERCISE - 40 points

Multiple Choice: (two points each)

1. d
2. a, c
3. d
4. c

Completion: (two points for each blank)

5. females; males
6. viral; treated
7. bacterial
8. sterile
9. "outercourse"
10. serial monogamy
11. antibiotics

TRUE OR FALSE: (two points each)

12. false - There is no immunity against future reinfection.
13. true
14. false - There are often no visible symptoms in an infected person.
15. true
16. false - A person can become infected by some STDs simply by touching the infected skin of a sex partner, even though there is no penetrative sex.
17. false - An abnormal pap smear **may** indicate an individual has an STD.

BLACKLINE MASTER #14: IDENTIFYING STDs

(PART ONE) - 70 Points

- | | |
|-------|-------|
| 1. b | 19. l |
| 2. h | 20. c |
| 3. d | 21. g |
| 4. i | 22. c |
| 5. k | 23. l |
| 6. l | 24. g |
| 7. l | 25. a |
| 8. f | 26. i |
| 9. l | 27. e |
| 10. m | 28. h |
| 11. j | 29. b |
| 12. a | 30. d |
| 13. j | 31. g |
| 14. d | 32. d |
| 15. f | 33. h |
| 16. a | 34. f |
| 17. h | 35. h |
| 18. h | |

BLACKLINE MASTER #15: IDENTIFYING STDS
(PART TWO) - 30 Points

Multiple Choice (2 points each)

1. b
2. b
3. d
4. d
5. b

Completion (2 points each)

6. ectopic
7. AIDS
8. AIDS, gonorrhea, herpes
9. pelvic inflammatory disease (PID)
10. chlamydia, gonorrhea, herpes, HPV

BLACKLINE MASTERS #20-21: POST-TEST (QUIZ)
100 Points

Part One - Multiple Choice (2 points each - total of 40 points)

1. c 11. b
2. d 12. b
3. b 13. a
4. c 14. b
5. b 15. b
6. d 16. d
7. d 17. a
8. d 18. b
9. b 19. d
10. a 20. e

Part Two

Completion (2 points for each word - total of 16 points)

21. AIDS
22. immune; system
23. viral; bacterial
24. scabies; pubic lice
25. chancres

True or False (2 points for each - total of 10 points)

- 26. true
- 27. false - There are often no visible symptoms.
- 28. false - There is no immunity from STDs.
- 29. true
- 30. true

Short Essay (total of 34 points)

- 31. Choose seven of the following symptoms: abnormal discharge from the penis, burning during urination, genital itching or burning, growths in the genital area, and/or sores on the genitals, rash, fever, fatigue, diarrhea. **(1 point each - total of seven points)**
- 32. Choose seven of the following symptoms: abnormal vaginal discharge, sores and growths on the genitals, burning during urination, abdominal pain, pain during intercourse, genital itching or burning, an abnormal pap smear. **(1 point each - total of seven points)**
- 33. Choose five of the following STDs: AIDS (for years there may be no symptoms), chlamydia, gonorrhea, hepatitis B, herpes, HPV, trichomoniasis. **(two points each - total of 10 points)**
- 34. Untreated chlamydia, a major cause of pelvic inflammatory disease (PID), can damage the reproductive organs, which can result in sterility. One potentially fatal complication of PID is ectopic or tubal pregnancy. **(eight points)**
- 35. Look for a sincere answer. **(two points)**

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McIlhaney, Joe S. Jr., M.D., *Sex: What You Don't Know Can Kill You*, Baker Books, Grand Rapids, Michigan, 1997.

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SCRIPT OF NARRATION CHOOSING TO BE DISEASE FREE

Music: Think, because you've got a choice, because you've got a choice, because you've got a choice. Think, because you've got a choice, you can use your voice, because you make a choice. Think, it never hurts to say no, oh, think, you've got time to go slow, now come on, come on, come on, come on, come on and think.

Narrative: Diane just went through a radical hysterectomy. Diane will never be able to give birth. Diane is 17 years old. A condom will not protect you from Human Pappilloma virus. One night, and she'll pay for that choice for the rest of her life. Save yourself. There's no pain when you abstain.

Pam: In my conversations with students, there seems to be some confusion about what a sexually transmitted disease actually is. A sexually transmitted disease is a disease that is transmitted through sex. Hello! What that means is that it takes some form of intimate sexual contact for the disease to be passed from one person to another. It is not transmitted through kissing, light kissing, hand-holding, a hug. It takes actual genital contact of some kind for the disease to be transmitted. Over three million teens are infected with a sexually transmitted disease every year. In the 50s we had approximately five sexually transmitted diseases we knew about and were treating. Today, there are over twenty diseases, 30% of them incurable. That means if you get this disease, you've got it for life.

Which is a lovely thing, guys, when you're getting ready to get married and you found this girl you love. This is it. She's the one you want to spend your life with. Pull out that diamond, look her in the eyes. If you're really cool, you'll get on your knees, and say, "Marry me. By the way, I've got genital warts. You'll get it ,too, and we'll both be treated for the rest of our lives."

You know, thanks for sharing. Glad to know that information.

These diseases have serious consequences. We're going to talk about

the four most common or at least most well-known sexually transmitted diseases today and discuss the symptoms, the treatment, and the way to avoid coming into contact with one of these sexually transmitted diseases.

Narrative: We've already done it. Why don't you want to now?

Boy: Why? I didn't realize the kind of risks we were taking before. I mean, I don't want to put myself, you, at risk.

Pam: In my dealings with teens over the last couple of years, it has been my experience that most teens who are sexually active actually believe that if they get up the next morning and herpes isn't tattooed to their forehead, they don't have a disease. The problem with a lot of these sexually transmitted diseases is there are no symptoms, or very few. Chlamydia is one of those.

Chlamydia is the most common bacterial sexually transmitted disease among teens. Approximately four thousand teens a day are infected with chlamydia. Chlamydia is a bacteria. That means that this is curable. With treatment, usually ten to fourteen days worth of antibiotics, we can wipe chlamydia out. The problem with chlamydia is mostly for girls. Girls, if you contract chlamydia, you run the risk of getting pelvic inflammatory disease. If you contract pelvic inflammatory disease once, and there's a twenty-five percent chance that you'll be sterile for the rest of your life. Twice, jumps to almost fifty percent. Three times, and there is a really good chance that you won't have children.

We've got women in their twenties, early thirties saying, "I'd like to start my family. I'm ready like to have a child." They try, can't get pregnant.

They go running to an infertility specialist. He checks and says, "My goodness, you've got all this scar tissue in your fallopian tubes, your ovaries, your uterus. You have pelvic inflammatory disease. You had chlamydia."

"I had what? I had a sexually transmitted disease? How could I have

had a disease and not know?”

It's too late.

Girls, hear this today. That guy can break up with you, leave you, meet another girl, marry her, and have a family. You're scarred for life. You have more to lose. The price is not the same and you need to understand that.

Girls, you have an open sexual system. He has a closed sexual system. You're easier to infect and you are far easier to damage on a permanent basis.

You have to release an egg from an ovary. It has to make its way through a fallopian tube that cannot be scarred in any way. If that takes place and conception takes place, the conceived egg now has to attach itself to the wall of the uterus. There can be no infection of the lining of your uterine wall. If the embryo is able to receive the nutrients it needs, the baby grows for nine months, you deliver.

He produces sperm. Big deal. Not that hard. Girls, you're more complicated. The consequences of chlamydia to you is going to be far greater than it will be in guys. You need to understand that, because you'll pay the highest price.

Narrative: My boyfriend is the only person I have had sex with. His ex-girlfriend before me was the only other person he ever had sex with. I never saw myself as being someone to get STD. Things like that don't happen to me. My boyfriend got tested. The doctor told him that he had the symptoms of chlamydia or gonorrhea.. I got tested. During my exam, it was determined that I had contracted gonorrhea. I never thought it would happen to me.

Pam: Human papilloma virus, or HPV, is also a virus. Contract this, you'll have it for life and pass it on to those you come into sexual contact with after infection. This is now the most common sexually transmitted disease in the United States. It's commonly known as genital warts. Basically, this is warts on a genital area that need to be burned off

periodically through laser surgery or chemicals.

We used to think that was the only big deal. It was just kind of gross. You get some warts, have to have them treated. Until we realized the HPV is one of the most common causal agents of cervical cancer in women. It can also cause cancer of the vulva, the uterus, and the penis. It is a very serious cancer-causing agent.

Jodi: I found out that I had genital warts on my six week post-pregnancy checkup, which was quite a shock to me because it had been awhile. I hadn't had sex since I found out I was pregnant and I guess I thought I was in the clear when I tested negative for everything at the beginning of the pregnancy. But, the warts came out of dormancy during my pregnancy and it was very hard for me, because I know that genital warts is an incurable thing. It's with you forever and I thought there's no way I'll ever get married. There's no man who is ever going to want to be with someone who's got this disease.

And of course it scared me because those warts can grow and if you don't catch them fast enough, it can cause cervical cancer and take away the ability to have children and I wanted to have children in the future. And, the hardest part for me is it's very humiliating to go to a doctor's office and have them put acid on the most sensitive part of your body to burn off warts. And when you don't have a good support system to go through that, it's very difficult and it's with you forever.

Pam: We've got 18-, 19-, 20-year old women undergoing radical hysterectomies because of cervical cancer. In fact, cervical cancer causes 4,500 deaths in women each year, which makes it the second leading cancer-causing death of women in this country.

I had a tenth grader stop me after an assembly in tears. She said, "Pam, three months ago I went to a party, got drunk, had sex with this guy. I don't know where he has been. I'm really scared. What do I do?"

I said, "You need to get tested. Do it today. If you can't get into see your family doctor today, you get in tomorrow. But you've got to be tested. Don't continue to think that this isn't going to happen to you."

She called my hotel that night and in tears. She said, “Pam, I have HPV. The warts were visibly present and the physician was able to see them and diagnose the virus right there.” And, she said to me that night, I’ll never forget her, “Why didn’t you come to my school three months ago? Nobody told me this. I didn’t know.”

I hung up the phone, sat alone that night and thought, “Would she have heard me? Or would she have sat like hundreds of teens and still somehow thought it wasn’t going to happen to them?”

The American College of Obstetrics and Gynecology is estimating that between 35 and 46 percent of sexually active teens are infected with the Human Pappilloma virus. Most of them show no symptoms, have no symptoms. You can carry and transmit this virus without having the warts. They’re not intentionally passing this virus on, they just don’t know that they’ve in fact got it.

HPV is transmitted through mere skin contact. It doesn’t take the exchange of bodily fluids, which makes this different from HIV. And also which means that most condoms don’t protect from the transmission of HPV. In fact, it doesn’t actually take sex. I’ve had hundreds of young women test positive for both herpes and HPV who were technically virgins. They thought they could do everything else. What was their biggest fear? Pregnancy. And they thought that if they did all this other stuff, they wouldn’t be risking pregnancy and therefore there would be no risk to them. They hadn’t realized that the more common risk is of sexually transmitted disease and that in fact they were risking that.

One of the more common questions I get from teens is this, “How far is too far? What can I do and not get a disease?”

I’m going to give you the medical answer to that question. My advice to you before I give you that medical line is that you back up. This is a fifty yard dash or a marathon, not the fifty yard dash. So, you know, if you ran a marathon the way you ran the fifty yard dash, you’re going to fall over and die. The advice is to back up, slow down, and pace yourself.

But the line medically that you can't step over is this: absolutely no genital contact of any kind. That includes oral sex. We have had, I had a girl come into my office one day, she wanted a pregnancy test. We did the test, it was negative. She got the look of relief like, let me out of here.

I said, "Wait a minute. You need a pap smear, a blood test, a vaginal culture."

She insisted that she wasn't at risk and didn't need those tests.

I said, "Yeah, you do. You need those tests."

She said, "Yeah, but Pam, I've only been with my boyfriend and he has only been with me."

"How do you know that?"

"He told me."

"That's good. Did you ask the right questions?"

You need to know more than whether or not this person has ever had sex before. You need to know that whether on any occasion that person has ever had genital contact with someone else besides you. If they have, you're at risk and you need to get tested.

Pam: Genital herpes is caused by herpes simplex virus, HSV. It may reoccur periodically and there is no cure. It is a virus. Once you contract it, you will have it for the rest of your life. The Centers for Disease Control estimates that approximately thirty million Americans above the age of twelve are infected with genital herpes, HSV.

In Atlanta, I met a couple that had originally come to me and said, "Hey, we have been waiting eight years to adopt a child. If you somewhere find a girl who might be interested in placing for adoption, tell her about us."

In July they had gotten a call they had been waiting eight years for.

There was a baby girl for them. They got so excited, went out and bought pink, decorated their nursery. Brought their little baby home from the hospital just three days old and named her Anna Grace. The next day Anna Grace wasn't well, was listless. Angie thought, "Maybe I'm a new mom. I don't know what babies are supposed to be doing." But, she got scared, called her pediatrician.

The doctor said, "Bring the baby in first thing in the morning."

Monday morning they brought little Anna Grace to the doctor. Chris was holding the baby. Angie was filling out all the paperwork, looked over at her infant daughter, who began to foam in the mouth and stop breathing. She was rushed to an emergency room in Atlanta where she died six hours later.

Anna Grace had herpes. Fourteen year old birth mom, her name was Robin, she gave herpes to her infant daughter during vaginal delivery. It is fatal to infants, usually within days or weeks.

Robin came to the funeral and, in tears, she looked at Angie and said, "I was in the eighth grade and I went to a football game on a Friday night. This eighteen year old kid took me behind the bleachers and my life will never be the same."

Not only did she get pregnant that Friday night, but she contracted herpes, a virus which she will have for life and most likely give to her husband some day.

Angie looked at me in Atlanta and said, "Pam, please don't let our daughter die in vain. There are thousands of teens out there who have absolutely no idea. It takes once.

Some of you listening to this today are going to get a second chance to make this choice. Some of you might not. And that's why it is so important you think about this before and not sitting in the back seat of somebody's car.

Narrative: If you love me, you'll show me.

Girl: If you love me, you want to see me healthy. Is that what you think love is? Asking me to do things that put me at risk?

Pam: HIV is also a virus. It's the virus that causes AIDS. This is a virus, that means there is no cure. This is a very deadly and serious virus. It is an equal opportunity virus. It hurts the guys as much as it does the girls. Condoms might provide some protection, but you need to understand that they're not 100%. Any exchange of body fluids puts you at risk for contracting this virus. The question you have to ask yourself is, "How much risk is my life worth for one momentary pleasure?"

I got a call from a community in western New York, which is one of the most heartbreaking calls and experiences I've had on the road. I got a call from a community in crisis and they said, "Pam, we really need you to come to our community now." It is a very difficult decision to make, but I decided to go to Jamestown, New York, and spend some time with the students there. Three weeks prior to my getting there, eight of their seventh and eighth grade middle school level girls had tested positive for HIV in that community. It was a devastating thing. They were all infected by the same young man, a nineteen year old by the name of Nushawn Williams. Maybe you've heard about the experiences of Jamestown, New York.

I got done speaking at one of the schools in Jamestown and was talking to several of the young girls in that school and noticed an eighth grader, a little blonde, beautiful little girl, standing off to the corner waiting for an opportunity to talk with me alone.

I wrapped up my conversation with the girls I was speaking with and walked over to this eighth grade girl who had just found out she was HIV positive. And with big crocodile tears in her eyes, she looked at me and she said this, "How could he do that to me? He loved me."

He loved her? That's love now? Love says meet my needs, it doesn't matter the kind of pain you might have to endure? Real love respects. Real love would never ask you to put your life on the line to meet their momentary need. This little eighth grade girl so desperately wanted someone to love her, someone to tell her she was pretty, say she

mattered, if she was willing to put her life on the line and risk so much. She thought that by giving sex, she'd get loved—and what she got was used.

Girl: Is it enough to just have sex for one night and have enough pleasure for just a couple hours or whatever? And, live with it for the rest of your life if you accidentally contract a disease or something. I don't think it's worth it.

Boy: Well, I think the single most important thing to think about before you have sex is, if the protection fails, and do you want to have a child with your partner? Do you want to get a disease your partner may have? All the things that go along with just having sex, cause no protection is 100 percent.

Pam: Some of you might be sitting there thinking, "This isn't for me." I hope all those kids who haven't had sex are listening, but you're too late for me. I've already made the choice.

If you're sitting there and you've had sex, you need to hear that this choice is for you. You have the same choice to make as everyone else. You can choose to walk out of here and say it doesn't matter, I've already done it, gonna keep on doing it, I don't need to listen to you. Maybe up until today, you've escaped some permanent, physical damage, you haven't contracted an STD. I don't know that and neither do you. Please get tested. If you do nothing else as a result of this, we are begging you to seek medical help. With good medical care, the permanent effects of some of the diseases can be drastically reduced. It's really important that you see a family physician, that you call your county health department and ask who is doing testing and how that can be done, at lower cost to you and confidentially if that's what you're concerned about. But, please get tested. Don't take the attitude that, "Well, I'd rather not know."

It is important that you get treatment as soon as possible, hopefully to curb some of the devastating effects that some of these diseases can have.

You need to also know that from this point on, you don't have to keep having sex. Don't ever let someone tell you that because you've had sex in the past, means you have to continue to do that. You don't. You choose. Today, from this day on, you can say, "No more, it's not worth the risk, it's not worth my life, it's not worth my potential to be a mother or a father and have children biologically some day. I am not willing to take those risks." That's a choice you need to make.

And by the way, if you haven't had sex, good for you. And, you can walk out of here and just kind of go, "Whew, this doesn't affect me. I'm O.K." Keep making great choices.

Music: Think, because you've got a choice, you can use your voice, because you make a choice. Think, it never hurts to say no, oh, think, you've got time to go slow, now come on, come on, come on, come on, come on and think. And if you're feeling, like you're the only one, let me assure you, that you're not, not alone. Think because you've got a choice, because you've got a choice, because you've got a choice. Think, because you've got a choice, you can use your voice, because you make a choice. Think, it never hurts to say no, oh, think, you've got time to go slow, now come on, come on, come on, come on, come on and think.