PHYSICAL GROWTH AND DEVELOPMENT

Bright Futures Patient Handout 15 to 17 Year Visits

Your Daily Life

- Visit the dentist at least twice a year.
- Brush your teeth at least twice a day and floss once a day.
- Wear your mouth guard when playing sports.
- Protect your hearing at work, home, and concerts.
- Try to eat healthy foods.
 - 5 fruits and vegetables a day
 - 3 cups of low-fat milk, yogurt, or cheese
- · Eating breakfast is very important.
- · Drink plenty of water. Choose water instead of soda.
- · Eat with your family often.
- Aim for 1 hour of vigorous physical activity every day.
- Try to limit watching TV, playing video games, or playing on the computer to 2 hours a day (outside of homework time).
- Be proud of yourself when you do something good.

Healthy Behavior Choices

- Talk with your parents about your values and expectations for drinking, drug use, tobacco use, driving, and sex.
- Talk with your parents when you need support or help in making healthy decisions
- · Find safe activities at school and in the community.
- Make healthy decisions about sex, tobacco, alcohol, and other drugs.
- Follow your family's rules.

Violence and Injuries

- Do not drink and drive or ride in a vehicle with someone who has been using drugs or alcohol.
 - If you feel unsafe driving or riding with someone, call someone you trust to drive you.
- Support friends who choose not to use tobacco, alcohol, drugs, steroids, or diet pills.
- Insist that seat belts be used by everyone.
- Always be a safe and cautious driver.

PREVENTION

VIOLENCE AND INJURY

- Limit the number of friends in the car, nighttime driving, and distractions.
- Never allow physical harm of yourself or others at home or school.
- Learn how to deal with conflict without using violence.
- Understand that healthy dating relationships are built on respect and that saying "no" is OK.
- Fighting and carrying weapons can be dangerous.

Your Feelings

- Talk with your parents about your hopes and concerns.
- Figure out healthy ways to deal with stress.
- · Look for ways you can help out at home.
- Develop ways to solve problems and make good decisions.
- It's important for you to have accurate information about sexuality, your physical development, and your sexual feelings. Please ask me if you have any questions.

School and Friends

- Set high goals for yourself in school, your future, and other activities.
- Read often.

AND ACADEMIC

- Ask for help when you need it.
- Find new activities you enjoy.
- · Consider volunteering and helping others in the community with an issue that interests or concerns you.
- Be a part of positive after-school activities and sports.
- Form healthy friendships and find fun, safe things to do with friends.
- Spend time with your family and help at home.
- Take responsibility for getting your homework done and getting to school or work on time.



American Academy of Pediatrics



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Alcohol: Your Child and Drugs



One of the most abused drugs in our society is alcohol. It's also a drug that many people start using at very young ages. Though it's illegal for people younger than 21 years to drink, many children are introduced to alcohol well before they reach that age. The earlier they begin using alcohol, the higher the risk they will have problems with it later in life. This publication was written by the American Academy of Pediatrics to help parents understand the dangers of alcohol and how to prevent alcohol use.

Why parents should worry

- Eighteen percent of 8th graders and more than 37% of 10th graders have been drunk at least once.
- Nearly 30% of 10th graders say they drank alcohol in the past month.
- Five thousand people younger than 21 years die each year as a result of underage drinking.

Also, young people who began drinking alcohol before 15 years of age are 4 times more likely to develop alcohol dependence during their lifetime than those who began drinking at 21 years or older.

Alcohol is often the first drug that young people try. Since alcohol is legal for those older than 21 years and found in most American homes, it's often easy for children to be around alcohol and its use. Some parents may feel relieved when they find out their teen is "only" drinking alcohol. They may even think it isn't dangerous. Not true! Alcohol can harm your child's normal brain growth and development. Also, if young people like the feeling they get from alcohol, they may be interested in trying other drugs as well.

Risks linked to alcohol use

Even if a person only drinks alcohol occasionally, it can play a part in a variety of risky behaviors. Just one drink can impair decision-making and slow down reaction time. Underage drinking is not legal and is also linked to

- Early sexual activity, multiple partners, unintended pregnancy, and sexually transmitted infections, including AIDS.
- Drunk driving. In 2004 2,115 young drivers aged 16 to 20 died in motor vehicle crashes; approximately 32% had been drinking, and 26% were legally drunk at the time of the crash.
- Using other drugs such as marijuana or cocaine.
- Health concerns like stunting brain growth, liver damage, hormone imbalances, and addiction to alcohol.
- School problems like poor grades and dropping out.
- Accidents and injuries that can be deadly or cause long-term problems.
- Crime, violence, and safety concerns.

Why young people drink

Young people drink alcohol for a variety of reasons.

- 1. Curiosity. They have heard that getting drunk is fun and they want to find out for themselves.
- 2. As a rite of passage. They see drinking as "something everyone does on their way to adulthood."
- 3. To get drunk. This explains why teens drink until they are out of control. Binge drinking (having at least 4–5 drinks in a short time, like 2 hours) is alarmingly common. Eight percent of 8th graders, 16% of 10th graders, and nearly 25% of high school seniors have reported binge drinking in the last 2 weeks.
- 4. To "fit in" with friends who drink.
- 5. To feel relaxed and more confident.
- 6. To escape problems, such as depressed feelings, family conflicts, or trouble in school or with a boyfriend or girlfriend.

Stages of alcohol use

The same pattern of use and abuse exists for alcohol as with other drugs such as marijuana or cocaine. The following is how experts explain the stages of alcohol use:

Stage	Description
Stuge	Description
Abstinence	No use.
Experimentation	The first 1 or 2 times your child drinks alcohol (more than a few sips). Children at this stage are curious about what it feels like to be drunk or high.
Non-problematic use	Repeated drinking in social situations without associated problems. Children at this stage drink in order to have fun with friends.
Problem use	Drinking for purposes other than recreation <i>or</i> drinking associated with a single problem, such as to deal with tension with parents or a school suspension. Children at this stage have begun to use alcohol to help manage their emotions.
Abuse	Drinking that has a negative impact on daily functioning <i>or</i> that is associated with recurrent and significant risks and problems. Children at this stage have experienced problems because of drinking but continue to drink anyway.
Dependence	Loss of control over alcohol use. Children at this stage have developed a compulsion to drink and no longer can simply decide to "just say no" or "stop drinking any time they wish."

How can I tell if my child is drinking?

Certain symptoms and behaviors are warning signs for alcohol use. Look for

- Alcohol odors on your child's breath or clothing
- Alcohol in your child's room or backpack
- · Obvious intoxication, dizziness, or bizarre behavior
- · Changes in dress and grooming
- · Changes in choice of friends; alcohol use by your child's friends
- Frequent arguments, sudden mood changes, and unexplained violent actions
- Changes in eating and sleeping patterns
- Loss of interest in activities
- School problems like declining or failing grades, poor attendance, and recent discipline problems
- Runaway and delinquent behavior
- Talk about depression or suicide; suicide attempts

How to prevent alcohol use

Parents can help their children resist alcohol use in the following ways:

- Boost confidence and self-worth by praising your child often for what she does well. Avoid constant criticism.
- Listen to what your child says. Pay attention and really listen. Be helpful during periods of loneliness or doubt.
- Know the facts and correct any wrong beliefs your child may have, such as "everybody drinks."
- Know who your child's friends are and set clear limits. Do not support friendships with others whose parents do not set similar limits.
 Real friends do not urge their friends to break the rules, like drinking alcohol, or reject them if they don't. Insist that a parent be at any parties your child attends. Don't let your teen go to parties where alcohol is served.
- Make promises. Have your child promise never to get in a car when
 the driver has been drinking. You must promise your child that you will
 always be willing to pick him up, no questions asked, when a safe ride
 home is needed. Promise each other you will talk about it the next day.
- Help your child deal with emotions. Let her know that strong emotions
 are normal. There are healthy ways to express strong emotions. Talk
 about any concerns and problems. Assure your child that everything has
 an upside, and things do not stay "bad" forever. Be a good role model in
 the ways you express, control, or relieve stress, pain, or tension.
- Talk about things that are temptations and those that are important
 to your child. Talk about school and your child's need for peer-group
 acceptance. Discuss life goals and desires. Talk about the risk of using
 alcohol and drugs and how that might prevent reaching those goals. Teach
 children exactly how you expect them to respond if someone offers
 them alcohol.
- Encourage healthy ways to have fun. Family activities, sports and physical activities, interests in the arts, and hobbies can all be good uses of leisure time.

Parents who drink alcohol

Parents who drink should be careful how alcohol is used at home. Having a drink should never be shown as a way to cope with problems. Don't drink in unsafe conditions—before or while driving a car, mowing the lawn, boating, etc. Don't encourage your child to drink or join you in having a drink. Parents who are problem drinkers or who use alcohol often and in large amounts place their children at increased risk of alcohol dependence. Studies show that alcoholism runs in the family, so children of alcoholic parents are more likely to become alcoholics.

Alcohol and the media

No matter how often they hear how dangerous it is to drink alcohol, many young people today still think it's cool. A big reason for this is the media. Alcohol companies spend billions of dollars every year promoting their products on TV, in movies and magazines, on billboards, and at sporting events. In fact, alcohol products are among the most advertised products in the nation.

Alcohol ads never mention the dangers, such as alcoholism and drinking and driving, or how it affects an unborn infant (fetal alcohol syndrome). Most ads show drinkers as healthy, energetic, sexy, and successful. Ads are trying to boost sales of a product, so this product—alcohol—is made to look as appealing as possible!

The following are tips on how parents can address issues related to alcohol and the media:

- Talk about ads with your children. Help them to understand the sales pitch—the real messages in these ads.
- Teach your children to be wary consumers and not to believe everything they see and hear on TV.
- Make sure the TV shows and movies your children watch do not show drinking alcohol as cool or glamorous.
- Don't let your children wear T-shirts, jackets, or hats that promote alcohol products.
- Talk with your children's school about starting a media education program.
- Use teachable moments. Discuss the tragedies resulting from alcohol
 use that are reported in the news. Ask your child what he thinks happened
 in the story and how tragedy could have been prevented.
- Join your child in learning all you can about preventing alcohol abuse.
 Programs offered in schools, churches, and youth groups can help you both learn more about alcohol abuse.

Your pediatrician understands that good communication between parents and children is one of the best ways to prevent alcohol use. If talking with your child about alcohol is difficult, your pediatrician may be able to help open the lines of communication. If you suspect your child is using alcohol or any other drug, ask your pediatrician for advice and help.

About teen confidentiality

All teens should be screened for alcohol and other drug use as part of routine medical care. Your child's doctor will want to ask questions about alcohol in private in order to get honest answers. If your child does report alcohol use, the doctor will determine whether your child needs very brief advice, a return visit, or a referral to a specialist. Every doctor will have his or her own policy about what information must be shared with a parent and what will stay confidential (meaning stay between the patient and the doctor), but most doctors will protect a teen's confidentiality if they believe that the teen's drug use is not an immediate safety risk to the child or others. It is important for you to respect the doctor's decisions about confidentiality in order to encourage your child to have an open and honest discussion with the doctor.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

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A Parent's Guide to Teen Parties

As a parent, you know the importance of your teen's social life and that parties are a way to socialize and relax. But an unsupervised or poorly planned party can result in unwanted or even tragic consequences. However, parental responsibility is the key to a fun and safe party.

The following is important information from the American Academy of Pediatrics about teen parties.

Facts about teen parties

- Guest list. When a teen plans a party, news spreads very quickly via social networking sites like Facebook or Twitter. Because of these new media, teen parties can grow too large for parents to control.
- Time and place. Teen parties often start late at night and move from house to house.

Facts about alcohol and drugs

Teens often expect alcohol and marijuana at parties. Some parents believe that it is better to allow teens to drink in their home so they can keep them safe. While this idea may be well intentioned, it is simply misguided. Parents cannot keep impaired teens safe.

Alcohol and other drugs impair judgment. Teens are more likely to have sex, be involved in a violent incident, or suffer an injury after using drugs or alcohol. All too frequently teens die from violence, unintentional injuries, or overdoses related to alcohol and other drugs.

Alcohol effects teens differently than adults. For example, compared with adults, teens are more likely to remain awake, to wander about, or to drive a car while having a much greater degree of mental impairment.

What parents need to know

Communication and honesty are important to keep your teen safe. Teens whose parents talk with them regularly about drugs and alcohol are 42% less likely to use substances than those whose parents don't. Tell your teens that you expect them not to use alcohol or other drugs at parties.

Parent networking is the best prevention tool to combat underage drinking. Get to know your teen's friends and their parents. If your teen is planning on going to a party, call the parents to ensure that they will be home and that they will not allow drugs or alcohol. If this is not possible, don't let your teen go.

Parents are legally responsible for anything that happens to a minor who has been served alcohol or other drugs in their home. If anyone brings alcohol or other drugs to your home, be prepared to contact their parents. And if someone comes to your home already intoxicated, make sure that they get home safely. Help your teen feel responsible for this as well.

Parents may be criminally or civilly liable if...

- Alcohol is provided to a minor at a party they have organized.
- Someone's property is damaged.
- Someone is injured.
- Someone leaves and gets into a car accident and/or injures someone else.
- Someone dies.
- Understand the local laws about alcohol and other drugs. Laws about alcohol and drug use vary from state to state, so make sure you know what the laws are in your state.

If you are hosting a teen party...

- ☐ **Plan in advance.** Go over party plans with your teen. Encourage your teen to plan non-alcohol—related group activities or games.
- ☐ Keep parties small. Ten to 15 teens for each adult. Make sure at least one adult is present at all times. Ask other parents to come over to help you if you need it.
- ☐ Set a guest list. The party should be for invited guests only. No "crashers" allowed. This will help avoid the "open party" situation.
- ☐ Set starting and ending times for the party. Check local curfew laws to determine an ending time.
- ☐ Set party "rules" and your expectations. Discuss them with your teen before the party. Rules should include the following:
 - o No tobacco, alcohol, or other drugs.
 - o No one can leave the party and then return.
 - o Lights are left on at all times.
 - o Certain rooms of the house are off-limits.
- □ Have plenty of food and non-alcoholic beverages available. Also, put your alcohol and any prescription or over-the-counter medicines in a locked cabinet.
- Be there, but not square. Pick out a spot where you can see what is going on without being in the way. You can also help serve snacks and beverages.

If your teen is going to a party...

- □ Know where your teen is going and how long he will be there. Have the phone number and address of the party. Ask your teen to call you if the location of the party changes. Be sure to let your teen know where you will be during the party.
- □ Call the parent of the party host to make sure a parent will be home the entire time and supervising the party. Make sure that tobacco, alcohol, and other drugs will not be allowed.
- ☐ Talk with your teen beforehand about how to handle a situation where alcohol is available at a party.

☐ Make sure your teen has a way to get to and from the party. Make		
	it easy for your teen to leave a party by making it clear that he can call	
	at any time for a ride home. Discuss why he might need to make such a	
	call. Remind your teen NEVER to ride home with a driver who has been	
	drinking or using other drugs.	

☐ Be up to greet your teen when he comes home. This can be a good way to check the time and talk about the evening.

☐ If your teen is **staying overnight** at a friend's house after the party, verify this arrangement with the friend's parents and that they will be home.

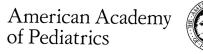
The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

The AAP Committee on Adolescence and AAP Section on Adolescent Health would like to thank the AAP Committee on Substance Abuse and AAP NY Chapter 2 Committee on Adolescence for their assistance in developing this publication.

From your doctor

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STDs/STIs: Protecting Yourself

What is an STD?

An STD -- short for sexually transmitted disease -- is an infection you can get by having sex. Sex in this case includes intercourse, anal sex, oral sex or skin-to-skin contact. Some of the most common STDs are listed below.

How can I PROTECT myself against an STD?

The only 100% sure way to protect yourself is NOT TO HAVE SEX. It only takes one sexual contact with someone who has an STD to catch it. If you are sexually active, protect yourself by using a latex condom and a spermicide foam, cream or jelly with nonoxynol-9 (check the label on the box) every time you have sex.

Did you know that... ONE OUT OF EVERY 8 TEENS GET AN STD.

Pubic lice (crabs): Girls and guys may have redness and itching around the genitals.

<u>Trichomoniasis</u>: Girls can have a heavy, greenish-yellow frothy discharge and pain when urinating. Guys don't usually have symptoms.

<u>Chlamydia</u>: Girls may have no symptoms or may have pain when urinating, itching around the vagina, yellow fluid (discharge) from the vagina, bleeding between periods or pain in the lower abdomen. Guys may feel a burning when urinating and have milky colored discharge from the penis. If not treated, chlamydia can cause infertility and other problems in girls and painful swelling of the scrotum in guys.

<u>Syphilis</u>: Symptoms: An early symptom is a red PAINLESS sore, called a chancre. The sore can be on the penis, vagina, tongue or throat. The glands near the sore may be swollen. After a few months, both guys and girls can get a fever, sore throat, headache, or pain in their joints. Another symptom is a scaly rash on the palms of the hands or the bottom of the feet. The sores and other symptoms go away, but this does not mean that the infection is gone. Syphilis can cause serious health problems if it's not treated.

<u>HIV/AIDS</u>: HIV (human immunodeficiency virus) causes AIDS. HIV makes the body's immune system weak so it can't fight disease. Symptoms may take years to develop, and can include infections, feeling tired for no reason, and night sweats. HIV CANNOT BE CURED.

Herpes: Girls and guys may have tingling, PAIN or itching around the vagina or penis. Small blisters can form in these areas and then break open. When they break open, the sores can cause a burning feeling. It may hurt to urinate. Some people have swollen glands, fever and body aches. The sores and other symptoms go away, but this does not mean that the infection is gone. The sores and blisters can come back (called an "outbreak"). HERPES CANNOT BE CURED.

<u>Gonorrhea</u>: Girls may have no symptoms or may have white, green or yellow discharge from the vagina, pain when urinating, bleeding between periods, heavy bleeding during a period or a fever. Both girls and guys can get sore throats if they've had mouth to penis or vagina contact (oral sex). Guys may have thick, yellow discharge from the penis and pain when urinating. The opening of the penis may be sore.

<u>HPV/Genital Warts</u>: HPV (human papillomavirus) can cause warts in or around the vagina, penis or rectum. In girls, the warts can be inside the body on the cervix or vagina so you can't see them. Or they can be on the outside of the body but be too small to see. The warts usually don't hurt. HPV CANNOT BE CURED.

How do I know if my **PARTNER** has an STD?

Ask. Although it may be uncomfortable, talk to your partner before having any sexual contact. Ask if he or she is at risk for having an STD. Some of the risk factors are having sex with several partners, using injected drugs, and having had an STD in the past. To be safe, protect yourself no matter what the person says. You must also tell your partner if you have an STD. You aren't doing yourself or your partner any favors by trying to hide it.

How do I know if I have an STD?

Watch for the symptoms listed above, but remember that most STDs don't cause any symptoms.

If you are sexually active, you should get regular check-ups and tell your doctor that you are sexually active. If you're worried that your parents will find out, you can ask your doctor not to discuss it with your parents. You can also go to a free health clinic. Don't let fear keep you from getting checked out. Imagine how you'd feel -- and how your parents would feel -- if you got really sick because you didn't get help. If you find out you have an STD, both you and your partner should get treated right away.

Can STDs be CURED?

Some can. STDs like chlamydia that are caused by bacteria can be cured with antibiotics. But STDs caused by a virus (like HIV or herpes) can't be cured. Your doctor can only treat the symptoms that the virus causes.

Don't wait to be treated! Early treatment helps prevent serious health problems. Even if medicine can't completely cure the STD, it can help keep you from getting sick. If you are given medicine for an STD, take it exactly as the doctor says.

For more information:

National STD Hotline:

800-227-8922

National AIDS Hotline:

800-342-2437 (English)

800-344-7432 (Spanish)

800-243-7889 (Hearing Impaired)

Effects of Premarital Sexual

Relations

WHAT'S THE BIG DEAL:

Lucy and Ricky Ricardo sleep in separate twin beds in the 1950s comedy "I Love Lucy" to avoid any innuendoes; now media rages with suggestive material. Nick Lebelle of Focus Adolescent Services reports:

- In 2003, 83% of the episodes of the top 20 shows among teen viewers contained some sexual content, including 20% with sexual intercourse.
- 42% of the songs on the top CDs in 1999 contained sexual content-19% included direct descriptions of sexual intercourse.
- On average, music videos contain 93 sexual situations per hour, including eleven "hard core" scenes depicting behaviors such as intercourse and oral sex.
- Before parents raised an outcry, Abercrombie and Fitch marketed a line of thong underpants decorated with sexually provocative phrases such as "Wink Wink" and "Eye Candy" to 10-year-olds.
- Neilson estimates that 6.6 million children ages 2-11 and 7.3 million teens ages 12-17 watched Justin Timberlake rip open Janet Jackson's bodice during the 2004 Super Bowl halftime show.

The internet is also a source of the perversion of sexuality; there are more than one million porn sites, and most of them are easy to find, even by accident. Porn, particularly, teaches teens to view women as mere sex objects, and later, porn becomes part of their sexuality. Paul Schenk, Psy.D. says, "It has the potential for teenagers to really mess up what their attitudes are about sexuality and really mess up relationships." "Although most teenage girls believe that sex equals love, other teens-especially boys-believe that sex is not the ultimate expression of the ultimate commitment, but a casual activity". Why shouldn't they? Is this not the message television is sending? Very seldom, if ever, does the entertainment business depict the sexual risks such as incurable diseases and unwanted pregnancies.

In the controversy of premarital sex, one side may argue it produces positive outcomes. The youth are forced to accept responsibilities such as using contraceptives, caring for another life, or dealing with the risks and consequences. In various cases, the teens use the situation as a turning point in life and choose to settle down and act more maturely. To ease the uneasiness adolescents sometimes feel when dealing with the opposite sex, some advocates proclaim it is beneficial to "test the waters" and to acquire experience. In this growing epidemic of sexual relations among teens, the bad results by far outweigh the good.

In his thesis on "The Phenomenon of Premarital Sex," Vic Fabe relates the information he discovered, "In the 1960s 25 percent of young men and 45 percent of young women were virgins at the age of nineteen; by the 1980s, fewer than 20 percent of males and females were." A survey performed in 2003 by a psychology unit found about one in five teens report having sex before age fifteen. More than half of fifteen to seventeen-year-olds have been with someone in a

sexual way. Other surveys have found that nearly two in three teens will have had sex by the time they graduate from high school.

The words most commonly uttered by teens choosing to become sexually promiscuous tend to relate to pregnancy: "As long as she doesn't get pregnant" or "If I get pregnant my parents will shoot me." Out-of-wedlock children constitute one in three of all births. In the United States in 1994, twenty-two percent of the births were to single girls eighteen years old or younger. Statistics show the teen pregnancy rate has fallen steadily between 1990 and 2000; however, the numbers are still quite high. In 2004 more than 415,000 babies were born to teens, and more than eighty percent of these births were to unmarried teens. These numbers do not include the babies conceived and miscarried or aborted.

Pregnancy presents many difficult decisions for the teen mother and father: Abortion? Adoption? Keep? "When teenagers become pregnant, abortion is a likely result. For girls under 15, there are 8 abortions to every 10 live births. For girls 15-19, there are 4 abortions to every 10 live births." If against terminating the pregnancy, adoption is another option, but for most females it is in their intricate nature to be unable to part with the infant. In deciding to keep the child, the mother will face many challenges ahead. More than three-fifths of teen mothers are poverty-stricken at the time of their child's birth and over four-fifths eventually live below the poverty level. Teen childbearing costs U.S. taxpayers an estimated \$7 billion per year. Low education levels account for a major portion of government dependency of teenagers; only about fifty percent of teen mothers are likely to finish high school. Teen mothers have a higher percentage likelihood of experiencing stressful major life events such as having a small child die or taken away, a disabling or life-threatening accident or injury, sexual assault or abuse, or an immediate family member addicted to drugs and alcohol. Despite these details, pregnancy should be the least of teenagers' worries.

For every unwed teenager who gets pregnant this year, 10 teenagers will get an STD. Approximately 333 million new cases of Sexually Transmitted Diseases are reported in the world each year. Teens are only ten percent of the population, but they account for twenty-five percent of all STDs. One out of four Americans has an incurable, viral STD; fifty percent of Americans age fourteen to twenty-five have an incurable, viral STD.

The World is plagued with over thirty-nine Sexually Transmitted Diseases. Hepatitis B is an extremely prevalent STD, and it is the biggest battle for pediatricians; however, the STD that arouses the biggest fear in society is HIV which eventually progresses into AIDS. Approximately twenty-five percent of HIV transmission in the United States is estimated to occur among people younger than twenty-one years of age. The human immunodeficiency virus destroys a certain kind of blood cell which is crucial to the normal function of the immune system. The symptoms of HIV are similar to those of many other diseases, so they cannot be relied on to determine HIV infection. Warning signs of the human immunodeficiency virus are as follows:

Rapid weight loss, dry cough, recurring fever or profuse night sweats, profound and unexplained fatigue, swollen lymph glands in the armpits, groin or neck, diarrhea that lasts for more than a week, white spots or unusual blemishes on the tongue, in the mouth or in the throat, pneumonia, red, brown, pink or purplish blotches on or under the skin or inside the mouth, nose or eyelids, memory loss, depression and other neurological disorders.

Many carriers of HIV do not have any symptoms at all for years. Many people contract HIV as teens but do not develop AIDS until later on in life. This fact is why comparatively few teenagers die of Acquired Immunodeficiency Syndrome. An estimated one-half million people in the United States died with AIDS in 2002, while only about two thousand of these were adolescents.

On average, the first stage of syphilis occurs twenty-one days after onset of infection. Anytime between ten to ninety days, the person may experience a firm, round, small, and painless sore where the syphilis entered the body. It lasts from one to six weeks, and it heals without treatment. During the second stage, the person may have a red or brownish head-to-toe rash, fever, swollen lymph glands, sore throat, patchy hair loss, headaches, weight loss, muscle aches, and fatigue. Once again, the symptoms of secondary syphilis will go away without treatment; however, without treatment the infection will progress to the late stages of disease. The third stage, also referred to as the hidden stage,

begins when the second disappears. The infection remains in the body even though there are no symptoms. At this stage there is no treatment. It may damage internal organs including: the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints. Signs consist of difficulty with muscle movements, paralysis, numbness, gradual blindness, and dementia.

Between twenty-eight and forty-six percent of men and women under the age of twenty-five are infected with human papillomavirus. The virus lives in the skin or mucus membranes and usually causes no symptoms. It infects the genitalia, causes warts, and, in some instances, leads to anal or genital cancers.

Among the other common STDs are Chlamydia, more so among teenagers than older men and women, and Gonorrhea, which cause painful discharges and may lead to sterility and to pelvic inflammatory disease in females; herpes, which causes genital ulcers; and trichomoniasis, which causes a discharge and itching in females and advances to urethritis in males.

Among teens who have not yet had sex, nearly a third say they have been "intimate" with a partner. So if teenagers decide not to have intercourse, then how far is too far? Is oral sex really sex? As one eighth-grader put it, "What's the big deal? President Clinton did it." The Missouri Division of Family Services of Focus Adolescent Services reports their categorization of the "normal range" of sexual behavior for teens:

- Sexually explicit conversations with peers
- Obscenities and jokes within cultural norm
- o Sexual innuendo, flirting and courtship
- o Interest in erotica
- Solitary masturbation
- o Hugging, kissing, holding hands
- o Foreplay, (petting, making out, fondling) and mutual masturbation: Moral, social or familial rules may restrict, but these behaviors are not abnormal, developmentally harmful, or illegal when private, consensual, equal, and non-coercive.
- O Monogamist intercourse: Stable monogamy is defined as a single sexual partner throughout adolescence. Serial monogamy indicates long-term (several months or years) involvement with a single partner which ends and is then followed by another.

Alicia in Pure Excitement offers her view on the topic, "Now I know that 'too far' doesn't mean only intercourse, but also the stages leading up to it Too far is when sexual thoughts take over your relationship. Too far is when you don't want to stop." Oral sex, like other methods of sex, carries with it the risk of serious, untreatable and even life-threatening diseases in both young men and women. Oral sex has been found to spread HIV, HPV, syphilis, gonorrhea, chlamydia, genital herpes, and possibly hepatitis C. Studies have shown that petting also leads to the transfer of some STDs.

Anywhere genital contact is involved, a person put himself or herself at risk.

Society and even the teenagers themselves focus on the physical aspects of the issue, and they neglect to address the emotional tolls premarital sex has on the younger generation. The sexual relationship is predominantly emotional and moral rather than physical in character. All actions, decisions, and attitudes begin in the mind. The mind is susceptible to manipulation by almost any attractive outside source. The brain has ten billion cells that act like tiny storage building that capture every voluntary and involuntary sight and sound a person ever sees or hears, especially when connected with music. The subconscious mind absorbs thoughts even when the conscious mind does not command it to do so. The mind is the foundation of human emotion, and it plays a large role in the aftermath of a premarital sexual experience. Premarital sex often leads to feelings of fear, guilt, regret, embarrassment, tension, distrust, lack of respect, resentment, confusion, and so much more.

Amidst all the others, depression is a prime mentality scientist have linked with premarital sex among teenagers. The Heritage Foundation found when compared to teens who are not sexually active, teenage boys and girls who are sexually active are significantly:

Less likely to be happy and more likely to feel DEPRESSED.

More likely to attempt SUICIDE.

In an evaluation 25.3 percent of sexually active teenage girls rate themselves as being depressed all, most, or a lot of the time. Only 7.7 percent of non-sexually active teenage girls report feeling depressed at the same level. While the numbers for teenage boys are much lower, the distinction between sexually active and not sexually active is apparent. 8.3 percent of sexually active teenage boys report being depressed all, most, or a lot of the time. Only 3.4 percent of non-sexually active teenage boys describe themselves in the same way. 14.3 percent of girls who are sexually active report having attempted suicide. Only 5.1 percent of sexually abstinent girls have attempted suicide. Six percent of boys who are sexually active have attempted suicide. Only 0.7 percent of sexually abstinent boys have attempted suicide.

Sexually active GIRLS are more than three times more likely to be depressed.

Sexually active GIRLS are nearly three times more likely to attempt suicide.

Sexually active BOYS are more than twice as likely to be depressed.

Sexually active BOYS are eight times more likely to attempt suicide.

Most sexually active teens express reservations and concerns about their personal sexual experiences. Most boys and virtually three-fourths of girls regard their own initial sexual experience adversely-"as an event they wish they had avoided." Nearly two out of three of all teens who have already had sex wishes they had waited longer before engaging in sex. Sixty-two percent of teens regret ever getting started. Janet shares her remorse, "The thing I regret most in my life would have to be losing my virginity. I was so young, and most people don't think 12-year-olds (7th grade) even know about sex." Jason gives his testimony in Pure Excitement, "I have made many mistakes in my life, including having had sex once. Afterward, I felt very bad and empty inside."

A shocking percentage of Americans condone premarital sexual relations; forty-one percent of the population thinks it is "not wrong at all." Merely twenty-nine percent think it is "always wrong." Twelve percent think that it is wrong with a few exceptions, and eighteen percent think that it is right with a few exceptions. "The average person 'falls in love' about seven times before he or she gets married. And there are those who say sex is okay if you're 'in love.' The problem with that is that your bride or bridegroom isn't supposed to be your eighth honeymoon."

Sex outside of marriage also has far-reaching psychological effects. Partakers usually obtain a fear of commitment which follows them later in life. They are less likely to have a satisfying marriage relationship, and non-virgins increase their odds of divorce by about sixty percent. "The Seven Effects of Premarital Sex" summarizes the extensive effects of premarital relations on a future marriage:

- 1. Premarital sex tends to break up couples before marriage takes place.
- 2. Many men do not want to marry a woman who has had intercourse with someone else. The strange logic seems to be, "Its (sic) okay for me to have sex with the girl you marry, but it's not okay for you to have sex with the girl I marry."

- 3. Those who have premarital sex tend to have less happy marriages. The physical relationship is an inadequate foundation upon which to build a lasting relationship.
- 4. Those who have premarital sex are more likely to have their marriages end in divorce.
- 5. Person and couples who have had premarital sex are more likely to have extramarital affairs as well. This is especially true for women; those who engaged in sex before marriage are more than twice as likely to have extramarital affairs as those who did not have premarital sex.
- 6. Having premarital sex may fool you into marrying a person who is not right for you sex can 'blind' you.
- 7. Persons and couples with premarital sex experience seem to achieve sexual satisfaction sooner after they are married. However, they are likely to be less satisfied overall with their sex life during marriage. It seems that their premarital sex experiences often rise to haunt them.

Mark Twain once said, "Sex takes the least amount of time, but causes the most amount of trouble." This is profoundly true for teen sex outside of a monogamous marriage. Doctor Dean Ornish proclaims:

I am not aware of any other factor in medicine-not diet, not smoking, not exercise, not stress, not genetics, not drugs, not surgery-that has a greater impact on our quality of life, incidence of illness, and premature death from all causes. Love and intimacy are at the root of what makes us sick and what makes us well, what causes sadness and what brings happiness, what makes us suffer and what leads to healing.

In the 1980s America boasted "safe sex" to alleviate the widespread fear of AIDS. As stated in Joe White's Pure Excitement:

Condoms fail 100 percent of the time...

in protecting a boy or girl's virginity.

in protecting a girl's reputation.

in protecting a boy's complex sexual memory bank.

in protecting a couple's purity and friendship development.

in protecting a boy's respect for a girl and vice versa.

in protecting a girl or boy's delicate self-image.

The effects of premarital sexual relations on teenagers protrude into all parts of their lives: <u>mental</u>, <u>emotional</u>, <u>and physical</u>. Self-disciplined youth protect their marriage beds from virus, fungi, bacteria, yeast, spores, and parasitic contamination, and they guard themselves from anger, doubt, stress, brokenness, and heartache. **By choosing to abstain**, teenagers free themselves to live life to the fullest without all the burdens of sex outside of marriage.