

THINGS YOU DON'T HAVE TO WORRY ABOUT WITH SEXUAL SELF-CONTROL

One disadvantage of being an abstinence educator, is we are exposed to the nastier side of human behaviors. However, if you are a parent or concerned adult preparing a teen for adulthood, you can't afford to bury your head in the sand and pretend sexual activity is all rainbows and unicorns. While you want to preserve your child's innocence as long as possible, there is a POSITIVE way to tackle these awkward topics.



Try saying, "Here's something else you never have to worry about if you master the art of sexual self-control."

For instance:

- ◆ *POZ gift givers* — people who are HIV positive WHO WANT TO INFECT HIV negative people.
- ◆ *Stealthing* — people who remove or damage a condom during sex without their partner's consent, either for their own pleasure or to get pregnant.
- ◆ *Genital Cosmetic Surgery* — a trend among TEEN GIRLS who believe they need surgery to make their parts look like the parts of porn stars.
- ◆ *Contraception Cancer Risks* — long term studies of women on birth control pills indicates a slightly **lower** risk for ovarian, uterine and colon cancer, but a slightly **increased** risk for breast cancer.
- ◆ *Yes Means Yes* — CA law on college campuses that requires **EXPLICIT AFFIRMATIVE VERBAL CONSENT** from your partner during each step of a sexual encounter — button by button or zone by zone.
- ◆ *Replaced By a Droid* — getting dumped for someone else is bad enough, but 27% of millennials say they would REPLACE A HUMAN LOVER with a droid.

(CONT.)

BABIES BY THE NUMBERS

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| 67% | of adolescent pregnancies are fathered by men over 18 |
| 60% | of adolescents under 15 have involuntary sex |
| 50% | of contracepting teens cohabiting with a boyfriend, get pregnant within 1 year |
| 25% | of sexually active teens were under the influence of drugs or alcohol at last sex |
| 23% | of unmarried women under 20, using condoms, get pregnant within 1 year |
| 20% | of teens (12-18) on the Pill get pregnant within 6 months |
| 20% | of adolescent girls want to be pregnant |
| 10% | of sexually active teen girls are infected with Chlamydia |

(ONE LESS THING TO WORRY ABOUT, CONT.)

Even as you recoil from the thought of having this conversation with your adolescent, remember it would provide you a great opportunity to be The First Best Source of Information AND demonstrate you are *on their side*.

CREATURES NEARING EXTINCTION



In 2016, there were only FOUR children born in Denmark with Down's syndrome after prenatal diagnosis and only 20 children born with Down's syndrome diagnosed after birth.

In 2014, the Danish government reported 98% of unborn babies who tested positive for Down syndrome were aborted.

In the neighboring country of Iceland, the eradication of Down syndrome babies has reached near 100%.

In France 97% of diagnosed DS babies are aborted. So many that the country banned a television commercial featuring Down syndrome children because it upset the mothers who previously aborted them.

While countries like Iceland are praised for their state-funded health care, the struggle to keep costs down creates an environment in which those who choose to give birth to a Down syndrome child are considered **selfish** for using up precious resources. The Dutch Ministry of Health published a list of the 10 most expensive diseases, **with Down syndrome at the top**.

But as pro-life actress Patricia Heaton clearly points out, "The country is not, in fact, eliminating Down syndrome. They are just killing everyone who has it."



COACHING EXERCISE!

Since adolescents don't think like adults, when Mom or Dad talks about not doing something, such as drinking, smoking pot or sex, teens often conclude (irrationally) "You just don't want me to have any fun."

Typically this is because their friends, the media, and youth culture suggests there are no down sides to these activities, or that those who experience them are few and far between.

But exploring topics such as *stealth*ing or "yes means yes" are a great way to make the neural connections between behavior and consequence.

As a coach, you want them to imagine how they would feel (process through the emotional center) and respond (make a connection in the prefrontal cortex). Ask how they would feel to discover they had been "stealthed." Or have them practice "yes means yes" as they do something non-sexual, such as helping put away the groceries or dishes — "Can I put this here?" gets to be tedious and clinical pretty fast.

The objective is to **connect the feeling to the behavior**. This is also a great time to praise any effort or insights they offer, while leaving your own conclusions out. If you give them the "right answer" you completely bypass the goal (making the connection), and just make yourself feel good.

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