



Director's Greeting

March 2008: GPA is Fully Fledged National Model.



A new [CDC study](#) states that one in four adolescent girls (ages 14-19) has at least one sexually transmitted disease. During the past 35 years, the number of sexually transmitted diseases has grown to epidemic proportions, due in part to the permeation of "safe sex" education for pregnancy prevention. While birth control will reduce the chances of becoming pregnant, birth control can not prevent the spread of all STDs.

The most common STD was found to be Human Papiloma Virus (HPV) with an 18.3% infection rate, followed by chlamydia (3.9%), trichomoniasis (2.5%) and herpes simplex virus type 2 (1.9%). According to a [2001 NIH Report](#), condoms will not protect against any of these four STDs, and at best provide only risk reduction against others. (See: [Summary Chart of the 2001 NIH Report on Condom Effectiveness](#))

However, other experts do not agree. There are those who believe that the risk reduction is substantial enough. Some experts say that the scientific research supports the conclusion that condoms can be effective in reducing the risk of STDs if used consistently and correctly, but the amount of that reduction varies across diseases and across studies. For example, The National Institute of Health convened a panel of national experts to address the question of the condom's protective capacity. The panel reviewed 138 studies which addressed eight major STDs. The only conclusive evidence agreed upon by the panel for reduction in transmission was for HIV (85% reduction), and for gonorrhea in men (71% reduction) but not women. The panel noted that several STDs are spread through skin-to-skin or skin-to-sore contact

with parts of the body not covered by a condom, including genital herpes, syphilis, HPV, and chancroid infections ([National Institute of Allergy and Infectious Diseases, 2001](#)).

Fortunately the public in general is beginning to realize that abstinence until marriage benefits the adolescent and society. The primary focus of abstinence-only education is and has been that of teen health. Avoiding an unwed teen pregnancy, of course, is important. However, preventing a deadly sexually transmitted disease is of greater importance!

Abstinence-only health education as a whole offers a positive, factual, scientific message to prevent loss of life, loss of self-respect, loss of education, loss of life goals and loss of freedoms. Any limitations to abstinence-only education are the result of funding constraints and misconceptions by those who do not understand that abstinence education empowers youth and parents with the tools and skills needed to choose a lifestyle free of sexually transmitted disease, poverty, addictions, and lost hopes and dreams.

It has been my experience that no parent wants their 12-year-old to be sexually active. I have confidence in the judgment and the power of parents. I have witnessed time and again that when responsible parents are given correct data they choose abstinence education for their children.

For example, in the 1980's, when sex education had become popular nationwide, the parents of Louisiana went to the state capitol and met with their state representatives to make it clear that only sex education courses that promoted ABSTINENCE can be taught in Louisiana schools (see [Louisiana Revised Statutes, Title 17](#)). Another example of parents advocating for abstinence-only occurred in the 1990's when parents from across the country visited with their congressional leaders on behalf of Abstinence Education. Because of the influence of passionate and responsible parents, Congress passed the [Title V Congressional mandate A-H](#) which provided funding guidelines for Abstinence Education block grants for every state. (See [Title V Welfare Reform](#)).

Louisiana's abstinence program is the only ongoing grass-roots program in the nation. The Governor's Program on Abstinence is the only abstinence program that has been adopted by the state's executive branch. Louisiana's program offers a previously tested working curriculum, teacher training, campus and community clubs, an interactive website, and statewide events and activities for students from 7th grade to college.

- 1) The support from the executive branch insures the continuation of the program and brings attention to the inclusive responsibility of elected officials, community leaders, medical and educational professionals, and citizens at large in supporting the youth in their participation in this preventive program.
- 2) The curriculum is designed for the mind of the adolescent which enables youth to comprehend, internalize, and take ownership of the abstinence message.
- 3) The abstinence clubs provide a vehicle for the youth to express their commitment and ability to help themselves and help others. It also provides a support group with the same standard from Junior High through High School and College.
- 4) The statewide activities allow for ongoing leadership, citizenship, and character development.
- 5) The GPA nationally acclaimed website and e-newsletter provide an ongoing educational and networking source for the youth, educators, and parents. (www.abstinencedu.com)

The combination of these GPA components is unique to Louisiana, making it the fully fledged model program for the country. The GPA invites parents and educators everywhere to take a closer look at Louisiana's Abstinence Program and to consider implementing this successful multifaceted strategy for empowering youth for healthy and successful living.

Gail Dignam
State Coordinator/Director
Governor's Program on Abstinence