

# The Blumenfeld Education Letter

"My People Are Destroyed For Lack Of Knowledge" HOSEA 4:6

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EDITOR: Samuel L. Blumenfeld Vol. III, No. 2 (Letter # 18)

The purpose of this newsletter is to provide knowledge for parents and educators who want to save the children of America from the destructive forces that endanger them. Our children in the public schools are at grave risk in 4 ways: academically, spiritually, morally, and physically — and only a well-informed public will be able to reduce those risks.  
"Without vision, the people perish."

## The Dangerous Trends in Sex Education

By Mike Arata

In a 1953 presentation before a number of Planned Parenthood workers, Dr. Lena Levine sounded a clarion call for American teenagers to help raise the curtain on a drama that came to be known as the "Sexual Revolution":

Our alternative solution is to be ready as educators and parents to help young people obtain sex satisfaction before marriage. By sanctioning sex before marriage, we will prevent fear and guilt. We must also relieve those who have them of their fear and guilt feelings, and we must be ready to provide young boys and girls with the best contraception measures available so they will have the necessary means to achieve sexual satisfaction without having to risk possible pregnancy. We owe this to them.(1)

Well, we have seen Dr. Levine's future, and it doesn't work. Fast forward to December, 1985: the House Select Committee on Children, Youth, and Families reports that there are now 1.1 million teenage pregnancies each year, of which 430,000 end in abortions. The controlling members of the

committee decide that more sex education, more contraception, and introduction of so-called school-based health clinics are the solution. Planned Parenthood responds with a \$1 million campaign to persuade the TV networks to lift their bans on contraceptive advertising.

Hold on there, don't call in the arsonists to put out the fire, says Rep. Dan Coats of Indiana in so many words as he presents the minority view on the Select Committee: "Progressively over the last 25 years we have, as a nation, decided that it is easier to give children pills than to teach them respect for sex and marriage. Today we are seeing the results not only in increased pregnancy rates but in increased rates of drug abuse, venereal disease, suicide, and other forms of self-destructive behavior," comments Mr. Coats.(2)

Approximately 10% of the unwed 15 to 19 year-old girls in our country now become pregnant -- about twenty times the rate when Planned Parenthood was officially founded in 1942. Almost half of those young girls will abort their babies, often at their friendly

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neighborhood Planned Parenthood clinic. Caring for the illegitimate children who haven't been suffocated, poisoned, pickled, or dismembered by the abortionist now costs the country an estimated \$17 billion a year, a 600% increase in the last 20 years.(3)

Even Planned Parenthood has had to admit failure. The September/October 1980 issue of Family Planning Perspectives, published by Planned Parenthood's research arm, the Alan Guttmacher Institute, stated that "More teenagers are using contraceptives and using them more consistently than ever before. Yet the number and rate of premarital pregnancies continues to rise." Six years later, the same publication stated that 18.4% of the young women who had relied on condoms to prevent pregnancy had in fact become pregnant.(5)

A recently released study by Dr. Dinah Richard, entitled "Teenage Pregnancy and Sex Education in the Schools -- What Works and What Does Not Work," reaches an important summary conclusion on the issues of teenage pregnancy and venereal disease: sex education without moral guidance is harmful -- both for kids and for society at large.

#### Editor's Note:

Mike Arata is an articulate, conservative teacher who has taught for 18 years in the public schools of the Cincinnati area. He has been an effective critic of the government schools and of the N.E.A. This report on sex education was presented on November 9, 1987 to the Mariemont, Ohio, school district Sex Education and Substance-Abuse-Prevention Committee. We thank Mike for his permission to reprint the substance of this report in our Letter.

Dr. Richard is particularly critical of scholastic sex-ed programs and public agencies which promote a false sense of security among adolescents by sanctioning their use of contraceptives. She points out that although federal expenditures on so-called "family planning" and "pregnancy prevention" programs quadrupled from 1971 to 1981, there was a 48% increase in teenage pregnancies (to 1.1 million a year) and a 133% increase in the abortion rate for girls aged 15 to 19 during the same decade. She also mentions America's epidemic of venereal disease -- which involves 20 million cases of venereal herpes, 5 million cases of chlamydia, and thousands of people dying of AIDS.

Dr. Richard arrives at her conclusions through analysis of a large number of separate research studies. These investigations provide grounds for a general indictment of both teenage contraceptive programs and the sex-education curricula that are currently found in most schools. Here are some of the topical statements drawn from these separate reports.

1. Though the teenage pregnancy rate jumped from the 1960's to the 1970's, the pregnancy rate has remained fairly steady through the 1980's. The birth rate for teens has dropped, however, due to an "epidemic" of abortions.

2. A sizeable percentage (28%) of teenage pregnancies are intended rather than accidental.

3. Federal funding for family-planning programs has increased, not decreased, the problem of teenage pregnancy.

4. Regular use of . . . contraceptives has not reduced teenage pregnancies.

5. Contraceptives have not decreased teen abortions.

6. Contraceptive education increases teen promiscuity.

7. Modern sex education ignores the principles of developmental psychology with regard to children and teenagers, thereby creating psychological problems in young people. In particular, modern sex educators tend to ignore the latency period in child development.

8. Modern sex education has not only created problems for youngsters, but has gone on to cause problems for the same people during their adulthood.

9. Modern sex education often fails to teach young people about the physically and psychologically harmful consequences of contraception and abortion, or the significant likelihood of developing sexually transmitted diseases (STD's) and cervical cancer.

10. And once again, Dr. Richard's summary conclusion: Sex education is not beneficial without moral instruction.(7)

Special mention should be accorded one of the reports cited by Dr. Richard. Dr. Jaqueline Kasun, an economist whose comments have appeared in the Wall Street Journal, has found that those states with the highest per capita "birth control" expenditures have the highest rates of teenage pregnancy.(8)

One of the most disturbing trends in modern sex education is the movement of explicit sex-education programs into lower and lower grade levels. A number of experts on child psychology have identified the ages of 6 through puberty as a latency period during which a child's sexual thoughts, fantasies, and interests are minimal and relatively quiescent -- but a time when academic course instruction is ideal.

This last statement is in fact a paraphrase of remarks made by Dr. Sean O'Reilly, professor at the School of

Medicine and Health Services at George Washington University, in 1978.(9) As Dr. O'Reilly's comments regarding K-12 sex-education programs are still appropriate in the here and now, we may do well to examine them in greater detail:

Many school systems, both public and private, have adopted [K-12 sex-education] courses. A multi-million-dollar educational enterprise is involved, with considerable vested interest also on the part of contraceptive manufacturers, pornographers, and such organizations as SIECUS, International Planned Parenthood, and Zero Population Growth. . . .

. . . they [the sex-education programs that are found in most schools] may propose and promise what they cannot deliver -- namely, value-free instruction that will insure what they call "responsible" sexual behavior . . . by [which] is implied reduction of venereal disease, reduction of illegitimacy, and reduction of unwanted pregnancies. . . .

Provision of detailed sex instruction either in the co-educational classroom or in-private to pre-pubertal child is ill-advised and potentially harmful. The professional reason for this fact is the existence and importance of the latency period in human personality growth and development. This is a period of varying duration, in most cases covering the ages of six through puberty, during which thoughts about sexual matters are minimal. The consensus reached at the [1969 meeting of the American Association of Child Psychoanalysis] was that the child's development is not served by encouraging his sexuality at this stage of life.

Dr. O'Reilly also quoted Dr. John Meeks, Director of Child and Adolescent

Services at the Psychiatric Institute of Washington, who wrote:

The relative quiescence of the latency period is extremely important in the development of a broad cognitive catalog of skills. . . . The focus of latency is on gathering information about the world and developing skills in dealing with it. Much of the previous sexual curiosity [of very early childhood] is sublimated toward the accomplishment of these tasks. . . . Classroom interaction which is explicit and directed toward anatomical details of sexual activity between human beings is an unfortunate interference with the normative developmental processes of the age. It is clear that sexual instruction in the lower elementary grades is unwarranted and potentially destructive to a large percentage of our children.

Dr. Myre Sim, Professor of Psychiatry at the University of Ottawa, added his own comments in responding to a request for information by Dr. O'Reilly:

It should be recognized that the school structure and grading system, while generally adequate for other educational attainments, are unsatisfactory for teaching sex to children. This may upset some pedagogues who feel that all education should be grist for their mill and that nobody else should be involved in the process. While this may be good trade unionism, it is bad education in this particularly sensitive and individual field. . . .

Sex is basically a private matter and does not lend itself at serious and responsible levels to public display, and this is what modern sex educators are doing. . . .

I agree [said Dr. Sim] that disturbances of the latency period interfere with the most productive

learning phase in child development. In this respect, it is anti-educational.(10)

Those who would violate the period of latency with explicit sex-education programs should read and ponder the following additional quotation:

The fact that the child often asks where children come from does not mean that one must explain it through and through when the child is so young. There is much that he or she does not know about other life problems. . . . A child must learn that many aspects of human life comprise an intimate secret realm which need not be shared or exhibited to all.

Only at a later age, when the child has already developed his understanding of people's intimate life and a habit of prudent silence about certain things, can he or she be told about sex.

But when and by whom should he or she be told? After reaching the age of puberty, and then by his or her parents. . . . Such talks will then be both justifiable and beneficial, for they will correspond to the natural awakening of the sex drive in the young person.

Such talks must also cover sex hygiene and particularly questions of sexual morality.

Sex education is and should be education for love -- that is, a great and profound feeling enhanced by unity of life, yearnings, and hopes. And such education must be conducted without overdependence on cynical public discussion of physiological problems.

Proper example is most important. If the child witnesses from the first year of his or her life a genuine love between father and mother, their mutual respect, aid,

and concern -- and their open manifestations of tenderness and affection -- these will be the most powerful educational factors. They will awaken the child's attention to serious and beautiful relations between man and woman.

No, as Dr. O'Reilly reveals, these comments were not drawn from a papal encyclical. They appeared in a guide for sex education published in Soviet Education, a monthly journal published by the Soviet Academy of Educational Sciences, in 1949.(11)

The article marked a sharp reversal in Soviet educational philosophy, for explicit instruction in human sexuality had been a part of the Soviet curriculum since 1921, with less than satisfactory results.

I find it ironic that an atheistic society can recognize the benefits of delaying sex education until the onset of puberty and even then making sure that the instruction is firmly grounded in moral principles and nuclear-family love -- while we who live in a country that was founded on Judeo-Christian ethics have instituted our own glasnost policy in the realm of sex education; we "let it all hang out." To be more specific, we insist on advertising sexual activity to groups of young children in our schools.

David Elkind, Professor of Child Study at Tufts University, has commented on the situation in his best-selling book, The Hurried Child:

... there is far from total agreement as to whether sex education in the schools is beneficial to any age group, much less to young people approaching adolescence. One has to conclude that sex education in the schools reflects adult anxiety about young people's sexuality. The "prejudice" that early sex education will produce children with "healthy sexuality" is open to serious question -- even

if experts agreed as to what healthy sexuality is -- which they do not. Sex education in the schools, given at ever younger ages and without clear-cut theoretical or research justification, is another way in which some contemporary schools are encouraging their pupils to grow up fast.(12)

If societal problems force educators to act in loco parentis, then why don't we do just that? We should hold back on sex education until it's developmentally appropriate for the child. And we should then insist that the education provided be firmly grounded in traditional moral principles and traditional family ideals.

Instead, we seem to have a fascination with allowing kids to make premature choices in the realm of human sexuality. Adults generally don't allow immature children to make choices in such aspects of their daily lives as nutrition, proper rest, toilet training, school attendance. . . . So why do so many sex-education (and for that matter, so many "drug-education") programs presume mature decision-making capability on the part of children?

I presently teach mathematics to three sections of 8th graders. I find that a number of these children cannot even take sufficient initiative to bring their books, their homework, their pen and pencil to class. I train such children to assume proper minimal degrees of responsibility. I don't give them choices in the matter, because their failure to assume personal responsibility will eventually have serious consequences for both themselves and the society which might have to support them. Isn't that also the case with teenage pregnancy and venereal disease (and drug involvement)?

Let's remember that children don't think like adults. When we as adults discuss sexual matters, we can think in the symbolic and the abstract. But when children deal with such things, they

operate in the concrete: words trigger pictures; pictures trigger action (experimentation).

So let's not subject our kids to the de-sensitizing (modesty-removing) and de-moralizing exercises which have been inserted into school curricula nationwide by Planned Parenthood types. Kindergartners don't really need to make coed visits to inspect toilets and urinals, followed by discussions of both slang words and proper terminology for anatomical features of males and females. And high schoolers really don't need to study illustrated guides for condom use and other "safe sex" practices.

Safe sex? We should not forget that one of the rationales being advanced for the expansion of explicit sex-ed programs is the spread of AIDS. Analysis of the data contained in the October 26 "AIDS Weekly Surveillance Report," published by the federal Centers for Disease Control (CDC), however, shows that rationale to be a poor one. In the United States, only 183 of the 44,395 cases of AIDS reported so far have involved children aged 13-19 -- or about one for every 90 school districts in the country.(13)

The CDC report doesn't make clear the modality of infection for these adolescent children; but it would appear from other epidemiological data I've seen that in a large majority of the limited number of adolescent AIDS cases, transfusion problems or drug involvement are implicated, rather than sexual activity.

Nevertheless, the Ohio Department of Health and Ohio Department of Education have promulgated their own AIDS educational package for use in the schools. Robert Bowers, Assistant State School Superintendent, says the program is "about as explicit as anything I know" because "it teaches that it [AIDS] is transmitted through the exchange of body fluids."(14)

The Ohio program has a number of deficiencies, not the least of which is

the fact that it was developed by a state health department that has apparently been co-opted by "gay-rights" activists. Additionally, the Ohio program:

1. Fails to fully implicate homosexual practices in the exponential spread of AIDS among homosexual males. Sodomy is particularly dangerous, as Dr. Gloria Mavligit has pointed out. The inner lining of the rectum consists of a single layer of columnar epithelium, "which is not only incapable of protecting against abrasive effect, but also promotes the absorption of an array of sperm antigens, thus ensuring their exposure to the immune apparatus. . . ." In contrast, "the lining of the vaginal mucosa comprises a squamous layer epithelium capable of protecting against any abrasive effect during intercourse."(15)

Only 6.7% of the cases of AIDS reported in the country have involved women; and a majority of those have been documented as IV drug related cases. It is now speculated that many of the cases of "heterosexual AIDS" cases reported in the country may involve the same unwise anal-sex practices in which homosexuals routinely engage.(16)

It has become obvious, with the fact that homosexual males continue to represent 74% of all AIDS cases in the U.S.,(13) that homosexuality should not be tolerated as just an "alternative lifestyle" but rather should be regarded as a parasitic deathstyle.

2. Says there is no evidence for casual transmission of the HIV virus which causes AIDS, though several studies have turned up cases of HIV seroconversion through apparently casual means. (17, 18, 19) Further, 69% of physicians surveyed believe they can get AIDS from their patients.(20)

3. Neglects to mention the rapid antigenic drift (mutational rate) of the HIV virus or its already established similarity to the maedivisna virus which fatally infects sheep,(21,

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22) perhaps through fecal contamination of drinking water or even through air-borne mucous aerosols.

4. Neglects to mention the established room-temperature survivability of the HIV virus outside the human body for at least three days under dry conditions and up to two weeks under moist conditions.(23)

5. Neglects to mention the possibility of insect transmission of the HIV virus. HIV is now known to survive in the intestinal tract of mosquitoes -- though transmission of the disease through insect bites has not yet been established.(24)

6. Says that there is now no danger of HIV infection through blood transfusions. Any health professional can tell you otherwise. The ELISA antibody test used to screen blood may not pick up HIV antibodies for several months after infection occurs.

Obviously, much of this information will be unsettling to children. Given that problem, and given the fact that juvenile AIDS is seldom if ever transmitted sexually, it should be clear that children need to hear a simpler, more direct message than that conveyed by the Ohio AIDS program: Save Sex -- not "safe sex." Hold off on sexual activity until marriage.

Given the dimensions of America's problem with teenage pregnancy and venereal disease, and given the patent failure of programs currently in place to deal with those problems, I suggest consideration of several common-sense ideas:

1. We must DEFINE what we mean by "sex education," and clearly establish its strategic purpose in our schools. At one end of the spectrum, as pointed out by a newsletter I once heard quoted, are the Ten Commandments and all that they imply. At the other end of the spectrum is a pimp teaching a young girl how to be a prostitute. The end toward which we should gravitate seems obvious.

Ted Koppel, ABC's Nightline host, had the right idea in the graduation address he gave at Duke last spring: "We have actually convinced ourselves that slogans will save us. 'Shoot up if you must, but use a clean needle.' 'Enjoy sex whenever and with whomever you wish, but wear a condom.' No! That answer is no. Not because it isn't cool or smart or because you might end up in jail or dying in an AIDS ward, but no because it's wrong, because we have spent 5000 years as a race of rational human beings, trying to drag ourselves out of the primeval slime by searching for truth and moral absolutes. In its purest form, truth is not a polite tap on the shoulder. It is a howling reproach. What Moses brought down from Mount Sinai were not the Ten Suggestions."(25)

If the mission of the district's program includes prevention of teenage pregnancy and reduction in the frequency of venereal disease infections, then it would appear that adoption of the K-12 programs currently being promoted throughout the country is ill-advised. These programs serve to entrench much of what has failed already.

2. We should hold back on sex education until the subject is DEVELOPMENTALLY APPROPRIATE for the child. We should then insure that the instruction provided is firmly grounded in traditional moral principles and traditional family ideals -- not Planned Parenthood chic.

3. PARENTS and TEACHERS must do a better job of educating children about the importance of postponing sexual involvement until after marriage. Marriage should be presented as the most moral, most fulfilling, and most societally beneficial situation in which sexual involvement can be experienced. Promotion of the contraceptive mentality compromises that message. Perhaps what we really need is parent education.

4. If we must teach sex education, then a positive, pro-active approach to

sex education, such as Colleen Mast's SEX RESPECT program, should be adopted. SEX RESPECT promotes chastity as a healthy, cost-effective alternative to the popular contraceptive mentality. In other words, children should be taught firmly that is the only 100% reliable method of birth control and venereal disease protection. Again, teaching about contraceptives compromises that message.

5. We should ensure that materials which unnecessarily contradict the message of abstinence ARE REMOVED from school libraries and resource centers. Specifically, magazines like Ms., which runs articles like "Multiorgasmic Men," "Teen Lust," and "Gay Gothic," and ads for "sexual aids," witchcraft, and lesbianism, should be removed.

6. We should realize that sex education is as much a matter of style as of substance. WHO TEACHES IS AS IMPORTANT AS WHAT IS BEING TAUGHT.

7. We should AVOID VALUES-NEUTRAL EDUCATION which unwisely tells immature children that they have a wide range of choices.

8. We should SEPARATE THE SEXES for any sex education program that is contemplated. Youngsters who come into the classroom with natural modesty should be permitted to retain it.

9. We should EXERCISE GREAT CARE BEFORE INVITING OUTSIDE SPEAKERS to tell students about sexual issues. Otherwise, we may wind up with another Walter Sherman (President of AIDS Volunteers of Cincinnati), who not only plied a student audience last spring with misinformation but went on to suggest that if the girls in the audience were to carry condoms in their purses, they could easily cover their heads in a rainstorm . . . and if a condom could cover their heads, well then, a condom could easily cover his fist . . . and if a condom could easily cover his fist, well then . . . Walter, who is nominally an Episcopalian minister, also told a young woman after his talk that the Bible is deficient in that it "just says no."

10. We must observe the legal requirements of the HATCH AMENDMENT and its attendant enforcement regulations.

11. We must utilize our collective power to require that our legislators and governmental agencies STOP SUBSIDIZING both promiscuity and illegitimate births with massive government funding. Simple economics tells us that what we subsidize, we promote.

12. We must work cooperatively to CHANGE THE GLAMORIZATION OF SEX that occurs on TV, on records, and in the print media.

13. To the extent possible, we should base decisions in the realm of sex education on HARD FACTS rather than speculative opinion.

In the final analysis, as Betty Kuehner said in an editorial letter, "There is only one thing that must be given to children who want to be sexually active, and that is how to say 'NO.'" And those children who don't care about sexual activity should not be energized by school programs to give it a try.

(Missing footnote numbers were for charts and graphs which were deleted due to space limitations.)

## PURE Conference

PURE (Parents for Unalienable Rights in Education) will hold its first national annual conference at Christian Liberty Academy, 502 West Euclid Avenue, Arlington Heights, Illinois 60004, (Chicago area) on Friday evening, March 25, and all-day Saturday, March 26, 1988. The purpose of the conference is to develop a national strategy for the assertion of parental rights and the defense and expansion of educational freedom. All are welcome to attend. For information, call Sharon Pangelinan at (806) 373-8849.