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INTRODUCTION

In July 1989, it was a privilege for me to come to Grand Cayman to lead the first educational workshops for health workers and prison officers in the Cayman Islands on prevention of HIV and treatment of persons living with HIV and AIDS. At that time, I came at the invitation of the Ministry of Health and as a consultant for the Pan-American Health Organization. I am pleased to be here again, this time at the invitation of the churches.

I want to acknowledge my wife, Pauline, who is here with me today. We met at university in Jamaica and have now been married for 43 years. We have been blessed with three adult children and nine grandchildren from our three children’s marriages.

In introducing the subject of values, I have adapted a quote from the Online Business Dictionary, which states that values are:

Values cannot be seen or handled – they are ideas that we hold on the inside, in our hearts and minds. But values are powerful because they guide our choices and the way we live. Values that come from the teachings of the Bible include honesty, truth, diligence, humility, respect for self and others, love, trustworthiness, sexual purity outside and inside of marriage, compassion and caring for the poor. In a world that seems to be changing around us, these values are worth preserving NOW.

1 This paper is a slightly revised version of a talk delivered on September 11, 2016. All emphases original.
I want to share with you seven take home messages related to the theme, *The Future is Now – Preserving values for a better tomorrow.*

My messages are:

1. Encouragement to parents and proxy parents in the Cayman Islands
2. In praise of traditional marriage
3. About sex and sexuality
4. About love
5. About safety in an age of HIV
6. About the blessings and dangers of privacy, and
7. About other pressures in today’s world

**MESSAGE 1.**

To parents and other adults

Here’s my encouragement to parents, grandparents, teachers, camp counsellors, neighbours, pastors, elders, deacons and persons who lead youth clubs! **Continue to commit yourself to teaching young people wholesome values which they will practice today and tomorrow and commit yourself to praying for our children.** Do not give in to the idea that older persons are a different generation and that we cannot connect with our children and grandchildren.

It is critical for us to stay in touch with them as the world continues to change. Staying in touch means *staying connected.* We must not be *disconnected* from our young people.

The Future is NOW. YESTERDAY IS PAST. How much time will you spend with your child or grandchild NOW?; how well will you listen to that teenager in your house NOW?; will you begin to take an interest in their hobbies NOW? Do you know where they are THIS EVENING and who their friends are NOW?

The future *is now* and we MUST stay in touch with them to teach them *NOW* by word and by example! Will you commit to praying for the youth NOW because the real battles of life are spiritual?

I credit my survival into healthy adult life most of all to my mother’s prayers and her faithfulness in teaching me from the Bible and from her experiences in life.

Another reason why I survived physically, emotionally and spiritually through my early years was because the adults in my
life were CONNECTED to me and guided me - my grandfather, my father and other relatives, neighbours and church leaders. I also had positive peer pressure – that is, for the most part. My teenage years included attending Youth for Christ and Inter-School Christian Fellowship Clubs in high school and enjoying recreation and teaching at Christian summer camps.

MESSAGE 2.

In praise of traditional marriage
By traditional marriage, I mean the union of one man and one woman as set out in the Bible. I am aware that this message is not popular in some parts of today’s world. But, when it is studied (I mean, researched), the evidence shows that the benefits of wholesome, Bible-style marriage are clear for the couple; and, if they are blessed with children, for their children.

Here is some advice that I offer about marriage. Some of the ideas and imagery are my own, while I have learned other ideas as I have listened to other teachers.

- First, don’t believe the fairy tales which end with the line, “And they both lived happily ever after” – and they never told you how! There are sunny days and rainy days in every marriage. A strong marriage includes love but requires “give and take” and adjustment.

- A healthy marriage is a relationship between two imperfect persons who are committed to learning and growing together and adjusting to change over time.

- The wedding is like the opening ceremony of the Olympic Games. The real games are what follow. The marriage is the real thing. And it can be a long and lasting love, where the foundation of love is commitment and where friendship and passion are some other healthy ingredients.

- A solid marriage is like an amusement park in which you can enjoy the rides but you are also responsible for maintaining the park.

- Preparation for marriage is important. I highly recommend pre-marital counselling with a trained counsellor. Pre-marital counselling is not a cure-all, but it certainly helps persons to move realistically into the games of marriage.
• A marriage is complete without children. If you have children, accept, love and support them, but strive to maintain your marriage.

• Married people are not better people than persons who are not married, so as a married man I do not disrespect persons who are not married.

Marriage is not for everyone. In Matthew 19: verses 11, 12
"Not everyone is mature enough to live a married life. It requires a certain aptitude and grace. Marriage isn’t for everyone. Some, from birth seemingly, never give marriage a thought. Others never get asked—or accepted. And some decide not to get married for kingdom reasons. But if you’re capable of growing into the largeness of marriage, do it.”(The Message translation)

MESSAGE 3.
About sex and sexuality
According to the Bible sex and sexuality are good gifts from God to us, even though these gifts have sometimes been spoilt. When it is used appropriately and in the right context – right time, right place, right person, the gift of sex brings great blessing and satisfaction. In the right context, it is an expression of intimacy between two persons who God has brought together for mutual comfort, companionship and pleasure and for producing the next generation of children. If it were not for sex between a man and a woman, none of us would be here today and the future of humankind would not be preserved. The Future is NOW and we need to use the gift of sex well NOW.

In today’s world, there is a whole movement that promotes pleasure and fun of all kinds, without boundaries. The word is Hedonism. If we apply the values of hedonism to sexuality, we promote the fun part of sex above every other purpose – fun for ME – no boundaries.

Like other good gifts, the gift of sex can be used badly. To drive this message home, I tell the story of a little boy who got a gift in a barrel from overseas. It was a lovely pair of long pants. His father hoped that he would wear it to the prize giving at school.

But the boy nagged his Dad to let him wear it on the first available occasion, which was to play a football match. It rained that day… And you can finish the story. A good gift used badly. In another version of this imaginary story, it’s a girl who received the gift of a dress. She nags her mother, who agrees to allow her to wear the
dress to go to the market carrying a basket. The trip to the market was uneventful, but on the way back, the basket was heavier and kept rubbing on the dress, damaging it. A good gift used badly.

The application of this story to human sexuality is that there is a right time and a right place for sex. Young persons may not always appreciate that the “right time” often involves waiting. I have a mango tree in my yard and this year it bore its best crop. It was hard for me to wait until the fruits got ripe, but the right time to enjoy them was definitely not when they were young and immature. I waited. This waiting is called delayed gratification. Can young people be taught the value of delaying sexual gratification? Yes, they can!

Older persons, including persons my age and even persons older than I also need to wait for the right person, the right time and the right place. I once overheard a professional man whose job took him away from his home country say that he was so sorry that HIV had come to the Caribbean because he could no longer look for sexual relationships while on assignment abroad because of the risk. That man couldn’t wait. Can we as grown-ups make the choice to delay sexual gratification? Yes, we can – and waiting is a clear way that we can remain safe from disease and from disappointment in marriage when we do so. Self-control is possible!

The Future is NOW!

Do you realize that the availability of condoms and other contraceptives since the 1960s has allowed many persons to have sexual relations away from home without the usual outcome of pregnancy and birth of children? Some thoughtful observers have also noted that, in many countries, the availability of medically performed abortions has increased birth control and at the same time has caused some persons to feel freer about having sexual relations, not always in the context of marriage.

MESSAGE 4.
Let’s change the subject and talk for a few moments about love

Love - one word in English; four words in Greek. The Greek word, phileo is translated in English as brotherly love – think Philadelphia, the city of brotherly love, from the same root word. Storge is the Greek word that is understood as “a wide-ranging force which can apply to affection between family members, friends, pets and owners, companions or colleagues.” In
common talk, we even use the word, love in reference to affection for favourite things, for example a pair of shoes or a favourite food.

*Agape*, which is often described as “unconditional love”, best captured by the love of God for us, undeserved and demonstrated in practical ways. It’s the form of love described in chapter 13 of Paul’s first letter to the Corinthians, a passage often used in weddings. *Eros* is the word that is used to mean romantic or sexual love. And there is a fifth Greek word, *epithumeo*, that is sometimes used in the context of love – it means to desire or to lust after someone or something.

So, understanding love can be confusing. And we often need to ask for clarification. I say to young people, if he or she says he or she loves you, ask the person, what kind of love they mean? A preference for ice-cream, which I call, “ice-cream love” is quite different from romantic love.

A working definition of love that I use is that love looks after the best interest of the person or the object that is loved. True love is different from self-gratification. **And true love does not always have to go to bed with you!**

Tina Turner’s song, “What’s love got to do with it?” comes to my mind over and over because of the experiences that I have had in meeting people in my medical practice and hearing their stories – stories that tell me that sex is sometimes experienced as taking advantage of another person. Many people testify that they have experienced sex either without commitment on the part of that other person. Some persons have told me that they don’t even know the names of some of the persons they have had sexual relations with!

**MESSAGE 5.**

**About safety in an age of HIV**

HIV has brought the matter of sexual safety to the forefront of our minds more so than any of the older sexually transmitted infections because in the early years of the HIV epidemic, AIDS was experienced as an immediate death threat to people’s lives.

And, in the age of AIDS, arguments have raged about people’s freedom to engage in sex in a variety of contexts, the risks associated with such freedoms and how the public, Governments and health care workers should accept and treat persons who practice alternative life styles are also discussed.
Let me share a part of my own professional story. After completing my first medical degree, I did further training in Internal Medicine and Clinical Infectious Diseases in Jamaica and England. I returned to Jamaica in 1980, one year before the first cases of the acquired immune deficiency syndrome (AIDS) were recognized in the USA and announced to the world. By 1983, the first cases of AIDS in Jamaica began to be discovered. Because of my training, I was placed on the front line in the response to the AIDS epidemic – in Jamaica and later on across the Caribbean.

In the early eighties, the modes of spread of AIDS had not yet been fully clarified. We were learning about the disease and the recommendations were that health care workers avoid all forms of contact with persons known or suspected of having AIDS. The advice was that when persons with AIDS died, their bodies should be handled very little and with much caution. It was scary.

The early impression also was that AIDS was a disease that affected mainly homosexual men. I soon had decisions to make in my medical practice. Could I examine my patients with bare hands as I always did? Would I be at risk? Would my family be at risk? Should I offer my service to patients with alternative life styles?

Some persons, including some Christians, were saying that this terrible illness was God’s punishment on wicked and disobedient people. I prayed and turned to the Bible to help me to decide what I should do. I read Luke 13:1-5.

“Now there were some present at that time who told Jesus about the Galileans whose blood Pilate had mixed with their sacrifices. Jesus answered, ‘Do you think that these Galileans were worse sinners than all the other Galileans because they suffered this way? I tell you, no! But unless you repent, you too will all perish. Or those eighteen who died when the tower in Siloam fell on them—do you think they were more guilty than all the others living in Jerusalem? I tell you, no! But unless you repent, you too will all perish.’ ”

I realized that in God’s sight we are all in the same boat. So, I did not categorize any of my patients with AIDS as being worse than I. I made the decision to treat them all.

Soon I was tested when a young man came to my office. He said that he had come “on behalf of a friend.” His direct question: Would I be willing to look after someone who was homosexual?
I explained that I did not agree with the lifestyle, but that I was willing to look after the person.

A few days later the same young man returned to my office. He was “the friend.” I looked after him throughout the rest of his illness. Those were the days before anti-retroviral drugs were available. One day his mother called me to say that her son was very, very ill. Would I come to the family home to see him? On arrival, I found him to be near death. I summoned up my courage and asked, “Do you pray?” He replied, “Only in emergencies.” We said nothing else to each other. I ministered to him as best I could. Afterwards I learned that he called his priest later that day and he died shortly after his priest visited him.

I have practiced safely for well over 30 years, taking recommended precautions, but remaining available to persons who still choose to come to me in my practice. I also learned and taught that it is easier to catch HIV when I am off duty than when I am working as a health care worker.

HIV and other sexually transmitted infections are caught and spread mainly by intimate sexual contact.

The safety message for all of us is in two, or perhaps three, parts, namely:

1. Beware of situations in which you do not know the other person’s sexual history. Take time to know him or her.

2. Be aware and beware of sexual networks.

3. Don't bury your head in the sand!

a) If your main partner (at home) is part of a network outside of home, and b) although it may be scary, find out your status confidentially and get any necessary help.

I believe that all of us, including this speaker, can benefit from knowing these things and making any necessary adjustments in our lives. We can also help and encourage others to understand risk and to be safe.

There is clear evidence from research that the risk of catching and passing on HIV is due to a combination of factors. These factors also relate to the risk of catching and passing other sexually transmitted infections AND some forms of cancer.
The risks build up by:
   a) Starting to have sex at an early age (pre-teen and early teenage), either by choice or by force.
   b) Having a sexual encounter or encounters with someone whose sexual history you don’t know.
   c) Being part of a sexual network, including having multiple partners.
   d) Changing partners frequently.
   e) Using alcohol and other mind-altering drugs
   f) Having unprotected sex, especially in the contexts already described
   g) Practising sexual behaviours that carry a significant risk either of cuts and bruises or of allowing contact with faecal material.

Of all the methods of close sexual contact that carry risk, the one that carries the greatest relative risk if one person already has HIV is unprotected anal intercourse; this can happen between men and men and between men and women. In fact, in my work in Public Health I have been told that some young women practice anal sex in order to preserve their physical virginity. This practice is very dangerous.

To emphasize the risk of infection associated with sexual networks, some public health teachers point out that an individual who is intimate with another person is actually being intimate with everyone else that that person has had sex with over time. The risk is increased for some infections which last for a long time because these infections can be carried over from one relationship to the next. Some examples are herpes, HIV infection, hepatitis B and human papilloma virus infection. We now know that human papilloma virus causes genital warts and in some cases can lead to cancer of the cervix in women and cancer of the penis in men.

It is not just persons who follow alternative lifestyles who are at risk of catching HIV and other diseases, although the truth is that in many countries, networks of men who have sex with other men create an exaggerated risk of catching and spreading these diseases. And networks become international because of travel. Infected men who have sexual relations with other men and with women can pass infections to both men and women. Infected women who have sexual relations with more than one male can pass on the infections to men.
The reality is that all sexually active persons regardless of our personal labels must pay attention to these risks and **take responsibility** for our behaviors.

The risks associated with sexually transmitted infections are not limited to the physical. This is because sex is not just a set of physical events. It is an emotional experience, or more accurately, a set of emotional experiences. Intimacy is emotional and triggers a variety of feelings and desires. The emotional dimension of sex has implications for health.

Wherever research has been done and published, it has shown that mental, emotional and relational problems occur at a higher rate among persons who pursue same sex or bisexual relationships. A thoughtful group of young persons in Jamaica has said that, “condoms do not protect hearts!”

**MESSAGE 6**

**The blessings and risks of privacy**

These days, privacy can be created in a moment. (Think of the regular telephone, the smart phone and the computer with access to the Internet.)

Privacy can be appropriate or inappropriate. Having your own room at home or your own personal space, telling a personal story, seeing a counselor or doctor are appropriate ways of using privacy.

As parents we teach our children to value and protect their “private parts” (front and back) and this is appropriate.

But when privacy becomes secrecy it often leads to danger. Inappropriate privacy can be created between two persons even in a public place – a wink, a whisper, a suggestive touch can all happen privately.

Pornographic images are often watched privately and because it is private, any of us can get caught in its web.

**MESSAGE 7.**

**Pressures**

Other pressures in today’s world that challenge Biblical values include:
The pressure to conform – to be like everyone else. The temptation to believe that “everyone is doing it”, that everyone is sexually active now.

*The curiosity to try out sex*

The pressure from the world around us, which is magnifying and glorifying sex more than ever today. Clothing designs, advertisements, books and magazines, television and movies, music and ordinary conversation frequently promote sex without clarifying the boundaries and risks. Today, some persons are defining themselves by their sexual preference. All these realities create pressure on us.

Add to this, that some national and international leaders appear to be promoting personal freedom without boundaries in the area of human sexuality. These are some of the pressures in the NOW.

**CONCLUSION**

I pointed out at the start of my talk that our values have a major influence on (our) behaviors and attitude(s) and serve as guidelines in all situations. Values cannot be touched or felt. They are intangible but powerful because they guide our choices and the way we live.

I have acknowledged the value of the Bible in guiding my life and I have shared with you **seven take home messages** based on current research and my personal and professional experience.

I commend the Cayman Ministers’ Association and the Seventh Day Adventist Conference for organizing today’s programme. However, **everyone present here must be part of the action team that preserves positive values**. Tonight there are speakers and listeners. Tomorrow, all of us individually and together are the action team – the team that promotes strong family life not only by talk but also by example. **The Future is Now!**