

Late-night support

A phone call and \$25 can help a child, self



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During my years as a DN columnist, I've revealed a lot about myself. I've told about the time I was incarcerated for a couple of weeks, and I've shared personal things about my body and how it functions. But here's something you may not know about me: I am a father.

Put down the croquet mallet, mama. I'm not a father in the sense that your thinking. I'm not even a father in the same sense that my father was a father. By that I mean I don't randomly wake my child at 3:37 a.m. by snapping a mousetrap across her nose.

No, I'm a father in a different sense. You see, my child lives in Addis Ababa, Ethiopia. I sponsored her through Christian Children's Fund, a program consistently identified as one of the best nonprofit organizations in the world. Her name is Meseret Tamaret. You'd love her; she's a walking 7-year-old cutie-pie.

If you would indulge me this, I would like to share the story of how I came to know little Meseret, and I assure you, it's as true as I am fat.

In 1995, I had what most people would call a "serious intent to spite my liver." In other words, I drank a lot. On nights I went out, I'd return home, make myself a drink and start calling folks on the phone. One night after hearing the phrase, "Do you have any idea what time it is?" and I responded, "Naw, and I don't particularly care," I decided to watch the boob tube until I settled down.

Now, I've got this problem that when it's late at night, and I've had a few too many, I tend to find every advertisement on television absolutely fascinating. I sit in awe wondering how I could have possibly survived so long without these products. I'm kind of weak that way and I've got the trashy merchandise to prove it. I've got more than 75 limited-edition collector plates of painted nature scenes. And I've ordered numerous foreign movies which, oddly, seem to have the same plot of a Russian man in his shorts trying to sell a dog a pint of whiskey.

But on this night, something crossed my eyes that made me cry. I mean honestly cry! And let me tell you something, I don't cry easily. (The last time I can remember crying was in 1993 when doctors informed me that the two small, marble-sized lumps on my testicles actually were my testicles.)

What upset me was the picture I saw on television of a frail little girl. Her malnourished belly poached from her body. Flies swarmed around her face, and she was so broken-hearted that she didn't even bother to shoo them away.

I didn't hear one word the announcer was saying; all I could

notice was that fragile, little life. In my drunken stupor, I fumbled for the phone and hastily mashed in the numbers I saw on the screen. After 30 minutes and seven unintentional calls to the same, very rude man in Peru, I got through to an operator at CCF. Here's how the conversation went:

"Thank you for calling Christian's Children's Fund. This is Marcy."
 "Ma'am? Yeah, uh ... hello?"
 "Hello?"
 "Yeah, I wanna help that little girl I saw on TV. My credit card number is ... (pause) hold on ..."

"Sir, do you want to sponsor a child?"

"Yes! God, I feel so terrible. Now you'll make for sure that the little girl I saw will get this money, right?"

"What we can do is have you sponsor your own child, and your money will be used ..."

"I don't want to sponsor my own child! I want to help that little girl I saw on TV. Now, if you ain't gonna help me, I'm gonna mail a check right now to Africa and hope that somehow she gets it."

It was then that Marcy told me what CCF was all about. It isn't just some nameless organization that dumps a bundle of bills on the doorstep of some underprivileged hut. It actually encourages personal bonds between children and sponsors.

After hearing the details from Marcy, I pledged \$25 a month. It turned out to be one of the best investments of my life, ranking well above the time I bought stock in the show "Cop Rock."

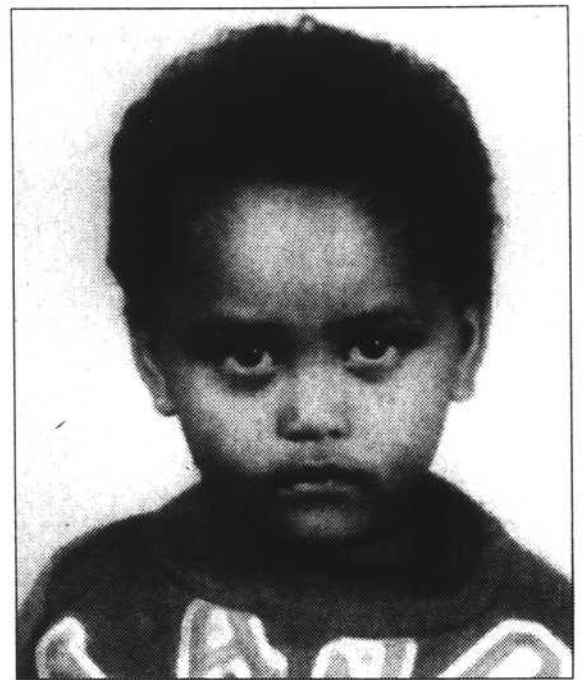
Only days after I hung up with

Marcy, I received a portfolio of my sponsored child. It told me all about little Meseret: where she was born, where she was from, and why her folks were having a hard time providing for their family. And it told me where my money went. It was amazing to see how my \$25 could help an entire family. When you think about it — at least in my case — \$25 is the price of a medium-sized meal at McDonald's. There's no question there.

—But the best thing about CCF is that it does everything in its power to get you involved in your sponsor child's life. I'll never forget the day I got my first letter from Meseret. I had sent little Meseret a picture of me holding my pet ferret who, at the time, was trying to swallow my nose. Meseret, of course, is a little young to write lengthy letters. But the workers at CCF made sure her parents received my communication. Her parents wrote me back and said Meseret laughed at my photo.

Who'd have thought I'd be making a little girl laugh thousands of miles away.

There are no losers when you sponsor a child. The child wins. The



Meseret

family wins. Even the corporation wins. But perhaps the sponsor is the one who wins the most. For me anyway, there's something very gratifying about rolling out of bed in the morning knowing I've done something right.

It took some disturbing pictures before I made the decision to sponsor a child. But it doesn't and shouldn't have to for others. So give CCF a call. The number is 1-800-776-6767, but don't ask for Marcy. I made her name up.

Just tell them you want to help a child. You'll feel better before you hang up the phone. And soon, so will a child.

Control yourself

These are the pros and cons of safe-sex options



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Time to put my information where my mouth is.

Last week, I discussed the need for further education about effective birth control options. Not only do teenagers need it, but a startling number of young adults (that means us, people) haven't the slightest clue about the issues involved in sex, despite the fact that 80 percent of them have it on a regular basis (and one in five may have some kind of sexually transmitted infection).

So, in what seems an appropriate follow-up, it's time for a crash course in contraceptive methods and issues. Since there is so much information to cover, and with very little space, this will be a two part column (or three parts, if you include last week's). This week's will cover spermicides, diaphragms, cervical caps, and the pill, while next week we'll tackle condoms (both the male and female varieties), IUDs, injections/implants, and the morning after pill.

Please remember: much of what is discussed in the "Pros and Cons"

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sections are based on opinions, and should in no way be the determining factor in what form (if any) you chose. Each person has his or her own unique situations and tastes (or lack thereof). Consult your doctor, the friendly folks down at the University Health Center or *sinister music* Planned Parenthood for further information.

That being said, let's begin:

Spermicides: These are chemical agents used to kill or immobilize sperm, as well as help prevent certain sexually transmitted infections (STIs). They come in a rather dizzying array of options, ranging from foams and jellies to gels and suppositories. They are inserted into the vagina before each act of intercourse and are best used in combination with other forms of birth control.

Effectiveness: 79 percent through typical use, 94 percent through perfect use.

Pros: These are readily available, fairly easy to use (many are now available in pre-filled applicators; just point and squirt), and can usually be applied up to 30 minutes in advance.

Spermicides also have the bonus of providing extra lubrication, which can be helpful.

This is one of the only birth control options besides condoms that actually prevents certain STIs.

Cons: Messy, especially if you're not used to applying them. Of course, sex isn't exactly a spic-and-span activity in the first place, and the problem decreases quite a bit once you become more experienced with the applicators. Also, as stated above, spermicides aren't terribly effective when used alone, instead serving as an effective supplement to other methods.

Diaphragms and Cervical Caps: These barrier devices cover the opening of the cervix (which is where sperm enter the uterus to get crazy with the egg). Most are used in combination with a spermicide of some kind. The diaphragm is a dome-shaped rubber or latex cup with a flexible metal spring, and is available in various sizes. Cervical caps are similar, but are much smaller.

Effectiveness: 82 percent for typical use of both (with spermicide), 91 percent for perfect use of cervical cap, 94 percent for perfect use of diaphragm.

Pros: These are excellent options for women with uncooperative partners who refuse to use protection (the other options being dumping his sorry ass, or at least cutting him off sexually; many women don't realize just how effective these two options are).

Neither partner should feel it during intercourse.

The diaphragm can be placed up to six hours in advance, and the cervical cap can be placed up to 48 hours in advance.

Cons: A prescription is needed to obtain one, since it's important to get one that fits. A lot more time and energy is needed to both obtain them and use them properly than most other methods, and without spermicides provide no STI protection. They are also, as a friend of mine put it, "slippery little bastards," with the tendency to "go flying across the bathroom while you're trying to apply the damn things."

Also, it's important to leave them in for a few hours after intercourse, but don't press the recommended time limit.

Birth Control Pills: These oral contraceptives are combinations of synthetic hormones, usually estrogen and progesterone, although certain progesterone-only pills are available. These are frequently prescribed by doctors to treat problems associated with menstruation.

Effectiveness: 97-99.9 percent. The main way you can foul this up is by forgetting to take them at the same time each day.

Pros: Very effective, when taken regularly. The Pill can also lower risks of benign (non-cancerous) breast disease, as well as ovarian and endometrial cancer. It also makes a woman's cycle more regular, and can lessen cramping and flow. Excellent for sexually active women with sexu-



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ally stubborn partners.

Cons: The Pill can cause some side effects, the severity of which depends a lot on the woman. Problems range from abdominal, leg, or chest pain, headaches (particularly migraines), eye problems and dizziness. If you develop any of these problems, see your health care provider immediately.

The Pill offers no STI protection, and forgetting to take it at the proper time can result in, well, you know.

The final con to the Pill involves obtaining it: you usually need a prescription, and if you want to get it (or any other prescription birth control) through the University Health Center, you have to attend a seminar on birth control that is given by the Peer Sexuality Educators. And guess who's one of them? *evil laugh*

That's all for now; we'll tackle condoms and other options next week. So until then, no sex. I mean it.