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Article

Affective-Sexual Behaviors in Youth: Analysis of a Public Health Survey in the School Setting

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Abstract: Introduction: Adolescence is a critical period for the development of affectivity and sexuality. Adolescents begin to explore their sexual identity, form intimate relationships, and learn to manage their emotions in new and complex contexts. This study aims to analyze the prevalence of habits and behaviors related to the affective-sexual health of adolescents in the 4th year of ESO, identifying risk factors, comparing behaviors and risks, monitoring these behaviors, analyzing pornography consumption, and evaluating the use of the internet as a source of sexual information. Method: Descriptive cross-sectional study using questionnaires. Participants are 4th-year ESO students from a school in the Baix Llobregat province (Catalonia) aged between 14 and 18 years. Descriptive and bivariate statistical analyses were conducted using the Chi-square test and p-value calculations with R Project software. Frequency and percentage analyses were also used to describe the health behaviors of the participants. Results: The study reveals that girls have better knowledge of the contraceptive pill and male condom than boys. Sexual initiation and condom use management vary between genders, with girls being more capable of persuading their partners to use them. Pornography consumption also shows significant differences in age of initiation and frequency between boys and girls. Conclusions: The study on adolescent affectivity and sexuality reveals knowledge about contraceptives, early sexual initiation, and high pornography consumption, highlighting the need for early and diverse affective-sexual education, youth empowerment, and media misinformation management to promote safer and healthier behaviors in municipal public health.

Keywords: Adolescents; Sexuality; Sexual Health; Pornography Consumption; Contraceptive Knowledge; Gender Differences

1. Introduction

Adolescence, as a transitional phase between childhood and adulthood, is characterized by significant physical, emotional, social, and cognitive changes, leading to ambivalences and contradictions in the process of personal and social equilibrium. This period is crucial for individual development. During this stage, there is a notable shift in emotions and in the way individuals relate to others. These profound changes affect both self-perception and interactions with the social environment, highlighting adolescence as a time of intense transformation. It is a decisive period for

adopting and consolidating healthy lifestyles, as well as a time for experimentation and selection of health-related behaviors broadly defined, encompassing all factors that contribute to individual well-being and biopsychosocial development. Schools play a crucial role in promoting the health and safety of young people [1].

Adolescence is also a critical period for the development of affectivity and sexuality. Adolescents begin to explore their sexual identity, form intimate relationships, and learn to manage their emotions in new and complex contexts. The way adolescents handle these experiences can have significant implications for their emotional well-being and long-term health. Understanding and accepting one's sexuality, as well as forming healthy affective relationships, are essential components of this developmental process [2].

Furthermore, this stage is characterized by experimentation and risk-taking, which can lead to potentially dangerous behaviors such as substance use, unprotected sexual practices, and other actions that may compromise physical and mental health. According to the Spanish Ministry of Health, 25% of adolescents aged 14 to 18 have engaged in sexual intercourse, and approximately 20% of them do not use contraceptives regularly, increasing the risk of unintended pregnancies and sexually transmitted infections (STIs) such as Human Immunodeficiency Virus (HIV) and chlamydia. Moreover, STIs are on the rise among Spanish youth, with the incidence of gonorrhea and syphilis doubling over the past decade [3].

The consumption of pornography and the use of the internet to seek sexual information are relevant issues during adolescence [4]. The accessibility of the internet has facilitated access to a vast amount of information, including sexual information, which can influence the development of sexual attitudes and behaviors [5]. A study by the Youth Observatory in Spain reveals that 70% of adolescents have accessed online pornographic content before the age of 18, and this consumption can impact their sexual expectations and behaviors, as well as increase the risk of addiction and mental health issues [6].

Conducting periodic surveys related to adolescents' health habits can serve as valuable tools for monitoring behaviors, with the aim of establishing future interventions for health promotion and prevention of maladaptive behaviors. It is noteworthy that adolescence is considered a crucial stage for research studies, as it is seen as a "sentinel agent" for future consolidated and maintained behaviors in adulthood [7].

Due to changes in policies related to the promotion and prevention of affective-sexual health habits in primary care, this study aims to provide a comprehensive view of adolescents' affective-sexual health, with the goal of offering practical recommendations for improving sexual education and public health policies. Therefore, the objective of this study is to analyze the prevalence of affective-sexual health-related habits and behaviors among adolescents enrolled in 4th year of secondary education (4th ESO), identifying risk factors, comparing behaviors and risks, monitoring these behaviors, analyzing pornography consumption, and evaluating the use of the internet as a source of sexual information.

2. Methodology

Study Design

This study employed a cross-sectional descriptive design with a quantitative approach, conducted in a municipality in the province of Barcelona during the 2023-2024 academic year. The aim of the study was to analyze the prevalence of affective-sexual health-related habits and behaviors among adolescents enrolled in 4th year of secondary education (4th ESO).

Study Population

The study included 120 students from 4th ESO at the selected school. Participants completed an online questionnaire individually and anonymously during class hours, following the acquisition of informed consent from their legal guardians. Participation in the study was voluntary, and data were collected confidentially and used only in aggregate form.

Ethical Procedures

This study adhered strictly to the ethical guidelines outlined in the Declaration of Helsinki. Informed consent was obtained from legal guardians to ensure voluntary, anonymous, and confidential participation of the students. The study was approved by the relevant ethics committee.

Data Collection Instruments

An online questionnaire consisting of 76 validated questions, categorized into various health-related domains, was used. The questionnaire covered topics such as sexuality, use of contraceptive methods, frequency of sexual activity, use of emergency contraception, incidence of pregnancies, use of condoms, consumption of pornography, and use of the internet as a source of sexual information.

Variable Recategorization

Some independent variables were recategorized by grouping responses to ensure that each category contained at least 10% of the cases.

Data Collection Procedure

The survey was distributed electronically to students during class hours. Data collection took place between November 2023 and February 2024.

Statistical Analysis

Descriptive statistics were calculated, including frequency, percentage, mean, and standard deviation (SD). Pearson's chi-square test was used to compare groups, and univariate and multivariate logistic regression models were applied to evaluate the relationships between demographic characteristics, knowledge, attitudes, and practices related to sexuality. A p-value <0.05 was considered statistically significant. All analyses were conducted using the R statistical software (R Project for Statistical Computing).

3. Results

Sample Description

The sample comprised 120 students from 4th year of Secondary Education (4th ESO) at a public high school in a town in the province of Barcelona, aged between 14 and 18 years. The average age was 15.2 years, with a gender distribution of 57.3% female and 42.7% male. The majority of students were native (71.8%), with 3.2% being first-generation immigrants, 16.9% second-generation immigrants, and 8.1% who did not specify their background.

Regarding family structure, 71% had a biparental family, 24.2% had a single-parent family, and 3.2% had a restructured family. Socioeconomic status was classified as high for 63.7%, medium for 29.8%, and low for 6.5%.

The educational levels of the parents showed that most had secondary education (39.1%) or university degrees (28.2%). A small percentage had no formal education (5.6%), primary education (8.5%), and 18.6% did not specify or were unsure.

Table 1 displays the knowledge of contraceptive methods among 4th-year students. It shows that knowledge of the contraceptive pill and male condoms is significantly higher among females (98.6%) compared to males (90.2%), with p-values of 0.013 in both cases. Conversely, knowledge of female condoms is similar between males (90.2%) and females (91.3%), with no significant difference (p=1.000). Additionally, 78.4% of males are aware of diaphragms compared to 73.9% of females, with no statistically significant difference (p=0.619). Finally, knowledge of intrauterine devices and spermicides is also greater among males, though these differences are not statistically significant (p=0.317 for intrauterine devices and p=0.066 for spermicides).

Table 1. Contraceptive Methods Known.

Contraceptive Methods	Boys (N=51)	Girls (N=69)	P-value
Birth Control Pill	90.2% (n=46)	98.6% (n=68)	0.013
Male Condom	90.2% (n=46)	98.6% (n=68)	0.013
Female Condom	90.2% (n=46)	91.3% (n=63)	1.000
Diaphragm	78.4% (n=40)	73.9% (n=51)	0.619
Intrauterine Device (IUD)	80.4% (n=41)	72.5% (n=50)	0.317
Spermicides	58.2% (n=30)	43.5% (n=30)	0.066

Table 2 presents data on penetrative sexual intercourse. The percentage of males who report having engaged in penetrative sexual intercourse is 23.5%, compared to 27.5% of females, with no significant difference ($p=0.122$). In contrast, a higher percentage of males (68.6%) report never having had penetrative sexual intercourse compared to 63.8% of females, with a significant difference ($p=0.041$). Knowledge of non-penetrative sexual intercourse is similar between males (7.8%) and females (7.2%), with a significant difference ($p=0.008$). Regarding the frequency of penetrative sexual intercourse, 16.7% of males report engaging in it several times a week, compared to 31.6% of females, although this difference is not statistically significant ($p=0.438$). The frequency of “occasionally” is similar between males (33.3%) and females (31.6%), with no significant difference ($p=0.077$). The category of “rarely” also shows similar percentages between males (25%) and females (31.6%), with no significant difference ($p=0.334$). Notably, 25% of males and only 5.3% of females report having had sexual intercourse only once, which is not statistically significant ($p=0.930$).

Table 2. Frequency and Penetrative Sexual Intercourse.

<i>Penetrative Sexual Intercourse</i>	Boys (N=51)	Girls (N=69)	<i>P-value</i>
Yes	23.5% (n=12)	27.5% (n=19)	0.122
No	68.6% (n=35)	63.8% (n=44)	0.041
Yes, without penetration	7.8% (n=4)	7.2% (n=5)	0.008
Total	100%	100%	
Frequency of Penetrative Sexual Intercourse			
Several times per week	16.7% (n=8)	31.6% (n=22)	0.438
Occasionally	33.3% (n=17)	31.6% (n=22)	0.077
Rarely	25% (n=13)	31.6% (n=22)	0.334
Only once	25% (n=13)	5.3% (n=3)	0.930
Total	100%	100%	
Protection Methods Used			
None	25% (n=13)	10.5%(n=7.2)	0.121
Unsafe methods	8.3% (n=4)	26.3% (n=18.1)	0.080
Barrier and contraceptive methods	75% (n=38)	94.70% (n=65.3)	0.639
Contraceptive methods only	0% (n=0)	10.5%(n=7.2)	0.080
Total	100%	100%	

The analysis in **Table 3**, which examines adolescents’ ability to manage condoms, reveals that 69.6% of females feel completely capable of persuading their partner to use condoms, compared to 51.0% of males, with a significant difference ($p = 0.048$). Additionally, 21.6% of males feel completely incapable of always carrying condoms, whereas only 8.7% of females feel this way, showing a difference approaching significance ($p = 0.058$). Regarding the ability to refuse to engage in unprotected sex, 39.2% of males and 49.3% of females feel completely capable of doing so, with no significant difference ($p = 0.277$). Overall, most differences between males and females regarding condom use are not statistically significant, except for the ability to persuade a partner to use condoms, where females perceive themselves as more capable ($p = 0.048$). Some differences, such as

the ability to always carry condoms, approach the significance threshold but do not reach it ($p = 0.058$), suggesting that, in general, both males and females have similar perceptions of their abilities in these areas, with a few exceptions.

Table 3. Ability to Purchase Condoms, Keep Them Handy, Convince a Partner to Use Them, or Refuse to Engage in Unprotected Sex.

Ability to:		Boys (N=51)	Girls (N=69)	P-value
Purchase Condoms	Completely Capable	35.3% (n=18)	44.9% (n=31)	0.258
	Quite Capable	39.2% (n=20)	31.9% (n=22)	0.430
	Quite Incapable	11.8% (n=6)	13.0% (n=9)	0.849
	Completely Incapable	13.7% (n=7)	10.1% (n=7)	0.582
Always Carry Condoms	Completely Capable	29.4% (n=15)	43.5% (n=30)	0.127
	Quite Capable	31.4% (n=16)	21.7% (n=15)	0.259
	Quite Incapable	15.7% (n=8)	26.1% (n=18)	0.168
	Completely Incapable	21.6% (n=11)	8.7% (n=6)	0.058
Convince Partner to Use Condoms	Completely Capable	51.0% (n=26)	69.6% (n=48)	0.048
	Quite Capable	27.5% (n=14)	18.8% (n=13)	0.305
	Completely Incapable	15.7% (n=8)	8.7% (n=6)	0.242
Refuse to Engage in Unprotected Sex	Completely Capable	39.2% (n=20)	49.3% (n=34)	0.277
	Quite Capable	17.6% (n=9)	17.4% (n=12)	0.976
	Quite Capable	17.6% (n=9)	11.6% (n=8)	0.424
	Completely Incapable	25.5% (n=13)	20.3% (n=14)	0.525

39.5% of adolescents consider that condoms are the most reliable contraceptive method, while 50% believe that they should always be used. Additionally, 62.9% think that using condoms effectively prevents the transmission of sexually transmitted infections (STIs), and 48.4% view it as an effective solution to avoid unwanted pregnancies. Although 31.5% of adolescents think that their friends believe condoms should always be used, only 11.3% feel that condom use reduces sexual pleasure.

Table 4 examines opinions on condom use among boys and girls. 39.5% of boys and 44.9% of girls consider condoms to be the most reliable contraceptive method, with no significant differences

($p = 0.258$). Regarding the necessity of always using condoms, 50.0% of boys and 43.5% of girls agree, with no significant differences ($p = 0.127$). Both genders agree that condoms are effective in preventing sexually transmitted infections (62.9%) and unwanted pregnancies (48.4%), with no significant differences in these perceptions ($p = 1.000$). Additionally, 31.5% of both boys and girls believe that their friends also think condoms should always be used, with no significant differences ($p = 1.000$). Finally, 48.4% of both boys and girls believe that condoms do not significantly reduce sexual pleasure, with no significant differences between genders ($p = 1.000$).

Table 4. Sources of Sexual Knowledge.

Source of Knowledge	Boys (N=51)	Girls (N=69)	P-value
Family	43.1% (n=22)	58.0% (n=40)	0.376
School	76.5% (n=39)	66.7% (n=46)	0.891
Friends	62.7% (n=32)	59.4% (n=41)	0.904
Social media	41.2% (n=21)	30.4% (n=21)	0.812
Internet	37.3% (n=19)	31.9% (n=22)	0.739
Pornography	31.4% (n=16)	2.9% (n=2)	0.013

Table 5 examines pornography consumption among boys and girls. The results indicate that 60.8% of boys and 53.6% of girls have ever viewed pornography, with no significant differences ($p = 0.710$). However, significant differences are observed in the age of first exposure: 12.9% of boys began viewing at age 10 or younger, whereas none of the girls started at that age ($p < 0.001$). Additionally, 45.9% of girls began at age 13, compared to only 6.5% of boys ($p < 0.001$). Regarding frequency of consumption, 12.9% of boys report excessive consumption, while no girls report the same ($p < 0.001$). Boys also tend to consume pornography habitually, with 22.6%, in contrast to 8.1% of girls, a difference approaching significance ($p = 0.069$). Furthermore, 58.1% of boys consume it occasionally, similar to 45.9% of girls, with no significant differences ($p = 0.958$). Additionally, 45.9% of girls have viewed pornography only once, whereas only 6.5% of boys have done so ($p < 0.001$). Regarding motivations for consuming pornography, 71% of boys do so to experience sexual desire, compared to 37.8% of girls, a difference nearing significance ($p = 0.063$). 25.8% of boys consume it out of curiosity, while 43.2% of girls do for the same reason, with no significant differences ($p = 0.693$). Finally, 3.2% of boys consume pornography to learn, compared to 10.8% of girls, with no significant differences ($p = 0.086$).

Table 5. Pornography.

Have you ever watched pornography?	Boys (N=51)	Girls (N=69)	P-value
Yes	60.8 (n=31)	53.6% (n=37)	0.710
No	35.3% (n=18)	44.9% (n=31)	0.498
Not Sure/Prefer Not to Say	3.9% (n=2)	1.4% (n=1)	0.518
Total	100%	100%	
At what age did you start watching pornography?			
10 years old or younger	12.9% (n=6)	0%	<0.001
11	22.6% (n=12)	8.1% (n=5)	0.070
12	58.1% (n=30)	45.9% (n=32)	0.957
13	6.5% (n=3)	45.9% (n=32)	<0.001
14	12.9% (n=6)	32.4% (n=22)	0.187
15	3.2% (n=2)	18.9% (n=13)	0.0094
Total	100%	100%	
Frequency of pornography consumption			

Excessive	12.9% (n=6)	0% (n=0)	<0.001
Habitual	22.6% (n=12)	8.1% (n=5)	0.069
Occasionally	58.1% (n=30)	45.9% (n=32)	0.958
Only once	6.5% (n=3)	45.9% (n=32)	<0.001
Total	100%	100%	
Reasons for consuming pornography			
To learn	3.2% (n=2)	10.8% (n=8)	0.086
To experience sexual desire	71% (n=36)	37.8% (n=26)	0.063
Out of curiosity	25.8% (n=13)	43.2% (n=30)	0.693
Suggested by friends	0% (n=0)	8.1% (n=6)	0.280
Total	100%	100%	

4. Discussion

This study examines the incidence of sexual activity, contraceptive use, and perceptions related to sexuality among adolescents. The findings provide a comprehensive view of sexual behaviors and attitudes in this population, and their comparative analysis with previous studies enriches the interpretation of these results. We conclude with evidence-based recommendations to enhance sexual education and prevention strategies, aiming to promote healthy and safe sexual development among adolescents.

Knowledge of Contraceptive Methods. The results indicate a high level of knowledge among adolescents about various contraceptive methods. The contraceptive pill and condoms are the most well-known methods, with notable familiarity among both boys (90.2%) and girls (98.6%). In contrast, spermicides are less known (boys: 58.2%, girls: 43.5%). Our findings on high awareness of condoms are consistent with previous studies showing widespread familiarity with these methods among adolescents [8,9]. However, the lower knowledge of less conventional methods, such as spermicides, aligns with existing literature suggesting insufficient promotion of these methods [10]. Research has highlighted that promotion and education about less common contraceptive methods, like spermicides, have been inadequate, contributing to lower awareness among youth [11] These results underscore the importance of improving education and promotion of a range of contraceptive methods to ensure adolescents have access to comprehensive and accurate information about all available options.

Sexual Activity. Our results show that the median age for the first sexual intercourse is 14.5 years. Approximately 23.5% of boys and 27.5% of girls have engaged in penetrative sex, while 7.8% of boys and 7.2% of girls have engaged in non-penetrative sex. About 68.6% of boys and 63.8% of girls have not had sexual intercourse.

Previous studies also observing sexual initiation found the average age of first sexual experience in Spanish adolescents to be between 16-18 years [12,13]. Another study noted that 12.8% of adolescents reported having sexual intercourse before age 14 [14]. Additionally, prior research suggests that the age of sexual initiation has remained relatively stable in recent decades around age 13 [9,15]. De Graaf et al. (2024) reported a decrease in early sexual initiation among 15-year-olds in 33 European countries, highlighting the influence of gender norms and gender inequality on these behaviors.

Evidence indicates that adolescents who initiate sexual activity before age 15 tend to engage in a greater variety of sexual practices and exhibit lower consistent condom use [12] These data reflect a concerning trend toward early sexual initiation, potentially influenced by factors such as peer pressure, sexual education received, and media influence. Additionally, [16] provide a systematic review of risk factors associated with early sexual initiation, emphasizing the impact of individual, familial, and social factors [5,17].

Contraceptive Use and Pregnancy. About 25.0% of boys and 10.5% of girls do not use contraceptive methods during sexual intercourse. Approximately 8.3% of boys use unsafe methods,

while no girls reported using these methods. 94.7% of girls use barrier methods and contraceptives, compared to 75.0% of boys.

The higher use of contraceptive methods among girls is consistent with previous studies indicating that women tend to adopt more contraceptive methods than men. The discrepancy in barrier method use between genders also reflects barriers faced by adolescent males [18,19]. About 43.1% of boys and 49.3% of girls feel capable of rejecting sex without a condom. A systematic cohort study found that mental health issues and beliefs and attitudes are significant risk factors for early sexual initiation. Substance use such as tobacco and alcohol also showed a high correlation with this behavior [16]. Regarding condom opinion, 39.5% of boys and 62.9% of girls consider it the safest contraceptive method. A study found that 75.9% of adolescents were aware of risky sexual behaviors [20]. Nevertheless, in terms of actual use of contraceptive methods among those who are sexually active, 75% of adolescents reported using barrier methods and combined contraceptives, while 8.3% use only contraceptive methods. A concerning data point is that 16.7% of respondents do not use any form of protection during sexual intercourse, indicating a significant gap between knowledge and practice [14]. One justification could be that users of LARC (long-acting reversible contraceptives) are less likely to use condoms, which could increase the risk of STIs [21,22]. Conversely, the observed tendency among girls to use emergency contraception suggests greater awareness or access to this method among them. The low reported incidence of pregnancies (5.3% among girls) indicates that, despite challenges in using protection, most young people are avoiding unintended pregnancies. These results provide crucial information for developing more effective sexual education programs, highlighting areas needing increased attention and resources.

Perceived Ability to Purchase and Use Condoms. Among boys, 35.3% consider themselves fully capable of purchasing condoms, while 44.9% of girls feel completely capable. Regarding the ability to carry condoms at all times, 29.4% of boys and 43.5% of girls feel fully capable. Regarding the ability to convince a partner to use condoms, 51.0% of boys and 69.6% of girls feel fully capable. Contraceptive use is high, with 75% of boys and 94.7% of girls using combined barrier and contraceptive methods. This aligns with previous research on sexual practices among Spanish adolescents, noting that 82% use some form of contraceptive, with condoms being the most common [13]. The difference in perceived ability to manage condoms between boys and girls may reflect differences in education and social expectations related to contraceptive use. Girls tend to feel more capable in various aspects related to condom use, which may be linked to greater social pressure to assume responsibilities in sexual protection [23]. Furthermore, evidence indicates that young women tend to negotiate contraceptive use more effectively [24,25]. However, it is also noted that young men often communicate more verbally about condom use, while women use more non-verbal signals [26]. These studies highlight the need to address social and educational expectations in sexual education programs to reduce gender disparities in the perception and use of contraceptive methods.

Sources of Information about Sexuality. Family is a significant source of sexual education for boys (58.0%), while school is the primary source for both genders, being more influential for boys (76.5%). Friends and social media also play significant roles, with boys using social media more (41.2%) compared to girls (30.4%). Pornography is mentioned by 31.4% of boys and only 2.9% of girls. The Internet is increasingly important as a source of information and sexual education, consistent with evidence especially in the later years of adolescence and among boys [14]. It is important to emphasize the need for comprehensive sexual education from an early age to address myths and misinformation adolescents may have about sexuality [27]. Our findings align with Rivera et al.'s (2021) integrative review, which also found that educational interventions can be effective in preventing risk behaviors in adolescents, highlighting the importance of sexual education as a tool to prevent sexual violence and promote responsible sexual behaviors.

Our study's findings on sexual education among adolescents are consistent with existing evidence on the effectiveness of Comprehensive Sexual Education (CSE). According to a systematic review of three decades of research, CSE in schools is effective not only in preventing pregnancy and sexually transmitted infections but also in promoting appreciation of sexual diversity, preventing partner violence, and improving socio-emotional learning and media literacy [28]. These findings

reinforce the importance of implementing sexual education programs that address a broad range of topics and adopt inclusive and affirmative approaches to human sexuality. It is essential to increase the quantity and quality of sexual education in schools, including practical training on contraceptive methods and the importance of protection. Developing and promoting reliable online resources and providing training and resources for parents to offer accurate and open information about sexuality at home is crucial.

Relationship with Pornography. About 60.8% of boys and 53.6% of girls have viewed pornography, with early exposure at age 10 or younger being more common among boys (25.8%) compared to girls (32.4%). Frequent consumption is reported by 22.6% of girls and 8.1% of boys, while 12.9% of boys report excessive consumption.

The main reasons cited for consuming pornography include curiosity (43.2%) and sexual desire (37.8%), with less interest in learning about sexuality (10.8%) and influence from friends (8.1%). Approximately two-thirds of adolescents have had their first experience with pornography, and 52.2% use it at least once a week. These findings suggest that pornography serves as a significant source of sexual information and stimulation for many adolescents [29]. According to evidence[30], adolescents tend to have their first experience with pornography during early adolescence, with an average age of first use around 12 years[30].

The differences in frequency and reasons for pornography consumption between genders may reflect different attitudes and behaviors toward sexuality. The habitual and excessive consumption of pornography among both boys and girls suggests a potential dependency on this type of content for sexual information. These patterns are consistent with previous studies showing greater pornography exposure among male adolescents, indicating that men often consume more pornography and have earlier exposure compared to women [21,29–35]. The study highlights significant differences in exposure and consumption of pornography between boys and girls. Boys are typically exposed at an earlier age and consume pornography more frequently for sexual satisfaction. In contrast, girls are more likely to encounter pornography accidentally and consume it out of curiosity. These findings underscore the need for comprehensive sexual education that addresses gender differences and promotes a healthy and critical understanding of pornography among youth.

Recommendations

To effectively address challenges in adolescent sexual and reproductive health, it is crucial to expand educational programs. Practical training on the correct use of contraceptive methods and emphasizing the importance of protection in all sexual relationships are fundamental. This expansion should ensure that adolescents not only have theoretical knowledge but also can apply this knowledge effectively in their daily lives. Additionally, easy and confidential access to contraceptive methods through school and community health services should be ensured. Implementing awareness campaigns to promote consistent use of contraceptives and educate about the consequences of inconsistent use is essential to bridge the gap between knowledge and practice.

Comprehensive Sexual Education: The study by Goldfarb & Lieberman (2021b) suggests that Comprehensive Sexual Education (CSE) is effective not only in preventing pregnancy and sexually transmitted infections but also in areas such as appreciating sexual diversity, preventing dating violence, and enhancing social/emotional learning [28].

School and Community Interventions: The systematic review by Mason-Jones et al. (2016) emphasizes the need to combine sexual education with incentives to increase its effectiveness. Moreno et al. (2014) suggest that structural and community interventions can improve condom use and knowledge, though they may not necessarily reduce STI transmission [36,37].

Feminist and Inclusive Perspective: The Guía Salud Sexual (2022) highlights the importance of a feminist and inclusive sexual education that breaks taboos and promotes diverse identities and sexual orientations [38]. This approach can foster an educational environment that prevents risks and promotes the sexual and emotional well-being of young people.

Multidimensional Approaches: Reis et al. (2023) emphasize the importance of addressing multiple dimensions of risk factors, including individual, familial, social, and environmental aspects, to understand and prevent early sexual initiation among adolescents [16].

Study Limitations

This study provides a detailed view of sexual health among adolescents within a specific population but has several significant methodological limitations. The cross-sectional design used does not allow for establishing causal relationships, limiting the ability to infer how certain factors may directly influence sexual behaviors. Additionally, the use of self-reports may introduce social desirability bias and memory errors, as adolescents might not recall accurately or adjust their responses to align with what they perceive as socially acceptable. The lack of sample representativeness also limits the generalizability of the findings to the broader adolescent population in Spain, suggesting the need for a more diverse and representative sample in future research. To address these limitations, further research is recommended to explore the long-term impact of pornography exposure and the barriers to consistent contraceptive use. Such future research is crucial for developing more effective educational strategies and public health policies that promote healthy and safe sexual behaviors among Spanish adolescents.

5. Conclusiones

The study titled “Affective-Sexual Behaviors in Youth: Analysis of a Public Health Survey in the School Setting” reveals significant findings that highlight both areas of knowledge and ongoing challenges in adolescent sexual health. A high level of awareness about contraceptive methods such as the pill and condoms was observed, though less common methods like spermicides are less known. This indicates the need for broader and more diverse education in this area. The average age of sexual initiation is 14.5 years, with a significant proportion of adolescents already sexually active, underscoring the importance of early educational interventions to promote safe sexual practices.

The consumption of pornography is prevalent among adolescents, with early exposure and significant gender differences regarding reasons and frequency of consumption. These results emphasize the need to integrate education about pornography and its potential impact into sexual education programs, promoting a critical and healthy understanding of this content.

Adolescents’ ability to obtain and use condoms varies, with girls reporting greater confidence in managing situations related to contraceptive use. This suggests a need to empower boys in this regard, addressing gender disparities in sexual education.

Regarding sources of information, family, school, and media play key roles, although pornography and social media emerge as significant sources, especially among boys. This highlights the importance of providing accurate and accessible information from an early age to counter potential misinformation.

The study has several limitations, such as its cross-sectional design and reliance on self-reports, which may introduce biases. Additionally, the sample is not fully representative of the entire adolescent population in Spain. Future research is recommended to explore the long-term impact of pornography exposure and the barriers to consistent use of contraceptive methods.

These findings provide a solid foundation for developing policies and educational programs that address the specific needs of adolescents, promoting comprehensive and safe sexual health. It is crucial that interventions are inclusive and consider gender differences, ensuring that all young people have access to quality sexual education that prepares them to make informed and responsible decisions about their sexual and reproductive health.

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