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What Do Young People Want to Know about Sex, and Where Do They Look for Answers? Case Study of Poland

Abstract

The survey included 341 people aged 18–30 who answered the following questions: What sexuality-related question have you wanted answered recently? Were you able to get an answer to this question? Where did you try to find the answer to your question? The sources of knowledge about sexuality that the respondents valued were also checked. The responses were subject to thematic analysis.

Analysis of the responses revealed five major topics containing 39 themes. The topics were sexual health (the most frequently sought answers concerned contraception, physiology and anatomy), sexual activity (the most frequent question concerned anal sex), sexual pleasure (the most frequent theme concerned orgasm), psychology and relationships (the most frequent theme concerned the quality of desire and sex in long-term relationships), and socio-cultural knowledge (the dominant theme concerned gender identity and sexual orientation). The most common source of knowledge is the Internet, mainly social media.

The results indicate a significant need for even elementary education on anatomy, physiology and contraception. Questions related to the impact of pornography and the need for respondents to understand rapid social changes, including diverse orientations and identities, are also prevalent.

Keywords: sex education, conservatism, politics, Poland, Eastern Europe, young adults.

Socio-political context

In 2015, the conservative Law and Justice Party came to power in Poland. Its members and its supporting social groups of right-wing and religious fundamentalists use a narrative in which "gender" (understood primarily as a construct that undermines the division between "naturally" female and male) is a dangerous ideology that threatens the natural order and family values. Actions taken in the area of sexual and reproductive rights are presented as a plan to depopulate Europe that is supposed to lead to profits for companies or clinics offering contraceptives, in vitro fertilization procedures, and abortion (Korolczuk & Graff, 2018). Despite some changes after the 2023 elections, no changes have been observed to date in three critical areas for sexual and reproductive health: the rights of sexual minorities, access to legal abortion and contraception, and sex education.

In recent years, a ruling of the Constitutional Tribunal was enacted, which made abortion illegal in the case of severe fetal abnormalities. According to the law, abortion can be performed only in two cases in Poland: (1) if the life of the pregnant woman is endangered and (2) in the case of a pregnancy resulting from a crime. This law is one of the strictest in European countries (Amnesty International, 2020). Doctors do not perform abortions even if one of the two remaining premises is fulfilled because they are fearful of being attacked by fundamentalists. It has resulted in the first cases of preventable deaths of women and the denial of women's right to abortion in the case of life-threatening danger¹. Among other things, this would mean a significant limitation on grassroots sex education that promotes equality and acceptance. Non-heteronormative people do not enjoy many civil rights in Poland, such as the possibility of marriage and the right to protection from discrimination (Majka-Rostek, 2018).

¹ Retrieved from: <https://bip.brpo.gov.pl/pl/content/sprawa-smierci-kobiety-w-ciazy-w-szpitalu-w-pszczyntnie-zaistniala-ustawowa-przeslanka>; <https://bip.brpo.gov.pl/pl/content/rpo-ciaza-blizniacza-kobieta-szpital-smierc>; <https://www.wysokieobcasy.pl/wysokie-obcasy/7,100865,29845502,zakaz-aborcji-zabija-ciezarne.html>

The increasing conservative radicalization of the public sphere has also harmed the state of Polish sexual education. Since the political changes of 1989, sex ed in Poland has been the subject of a worldview dispute, and it was only available for a short time (with parental consent) in Polish schools. Conservative circles have advocated since 1989 that knowledge about sexuality should only be taught by parents following their values (Wąż, 2017). As a result, the curriculum for the only subject that potentially addresses sexuality (Education for Family Life) has focused mainly on a moralistic anti-sex campaign rather than content that promotes safer and more enjoyable sex. In April 2020, the Polish Parliament voted on a civic bill that bans sex education, under which sex educators would face prison sentences (Savage, 2020; Bodnar, 2020). The PRO (Right to Life) Foundation is engaged in social action in which vans are driven on the streets of Polish cities informing that the LGBT lobby wants to teach masturbation to 4-year-old children², which is supposed to be a paraphrase of the WHO guidelines on sex education. The last Minister of Education publicly described sex education as demoralizing to youth³.

The state of sex education in schools

As mentioned earlier, only Education for Family Life (EFL) theoretically offers knowledge about human sexual life and "about the principles of conscious and responsible parenthood, the value of the family, life in the prenatal phase and methods and means of conscious procreation" (Journal of Laws of 2014, item 395). Unfortunately, these EFL textbooks differ from the recommendations of the World Health Organization concerning comprehensive, holistic sexual education (WHO, 2010). The content concerning sexuality is not based on the latest medical and sexological knowledge, and it has not been adapted to students' stages of development. Moreover, it reproduces and perpetuates gender stereotypes (Gorajska et al., 2018) and promotes homophobic and transphobic messages (Grunt-Mejer, 2017). These textbooks present the "naturalness" of gender differences, gender complementarity and binarity, leaving no room for non-stereotypical gender behaviours and expressions (Chmura-Rutkowska et al., 2016). Homosexuality and trans-genderism are presented as disorders of sexual development (Król, 2007, 2009). In the textbooks recommended by the Ministry of National Education on this issue, one can read about the possibility of preventing homosexuality and therapy for homosexual people, both of which are con-

² Retrieved from: <https://wiadomosci.onet.pl/warszawa/warszawa-zatrzymanie-furgonetki-fundacji-pro-prawo-do-zycia/gy0p7sl>

³ Retrieved from: <https://wiadomosci.gazeta.pl/wiadomosci/7,114883,27977054,przemyslaw-czarnek-o-edukacji-seksualnej-typu-b-demoralizacja.html>

trary to the current state of sexological knowledge and the Position of the Polish Society of Sexology (2016). Waszynska, Groth, and Kowalczyk (2013) indicate that the transmission of such incorrect knowledge by teachers can foster misinformation, the emergence of fears and anxieties among youth, and the spread of intolerance and prejudice.

The EFL textbooks recommend an "ecological lifestyle of marriage" based on natural family planning methods (Król, 2009). "Ecological" refers to the assumption that any contraception (i.e., condoms, spermicides, birth control pills) interferes with the natural physiological process and is a means of sexually exploiting women, thus resulting in women's health problems and a threat to gender equality (Król 2007). There is also false information that some contraceptives have early abortive effects (Król, 2013). A potential unintended pregnancy has only one acceptable solution: giving birth to the child. Abortion is portrayed as the murder of a child, resulting in lifelong trauma and a host of health risks for the woman (Król 2007).

The EFL textbooks portray male masturbation as an immature, selfish activity that can lead to addiction and sexual problems with partners; female masturbation is not mentioned (Król 2007). On the one hand, girls are portrayed as uninterested in sex and not naturally desirous (Król 2007); on the other hand, it is mainly women who are warned against premarital sexual activity and are warned in very frightening terms of the unwanted consequences of intercourse. Girls are held responsible for not allowing sex before marriage, including "not provoking" men. When addressing the topic of rape, the textbooks lack any consideration of male culpability, responsibility, and self-control; rape itself is trivialized, and no mention is given of where to report it or what penalties the offender faces (Grunt-Mejer, 2017).

The lack of professional teaching staff results in classes being taken over by individuals with a high potential for worldview conflicts of interest, such as the priests, nuns and lay catechists who conduct (Catholic) religion classes in schools. Some schools counteract these systemic deficiencies by inviting professional sex educators or using school funds or special programs funded by city budgets. However, such attempts to fix the system are met with disapproval by the current Minister of Education and Science, who encourages school superintendents to prevent sex educators from entering schools. According to the minister, "the superintendent is the guardian of normality in schools who prevents the demoralization of children through extended sex education" (Bagińska, 2021).

Young people's current knowledge about sexuality

The assumptions of right-wing politicians about the validity of teaching sexuality in the privacy of the home are not supported by data on at-home sex education.

According to a report by the Ponton group, 53% of respondents did not receive any information on contraception at home, and most young people did not talk to their caregivers about sexual violence, masturbation and sexual orientation. At the same time, at school, they are provided with unreliable information or none at all⁴.

Bulkowski et al. (2015) examined knowledge of selected issues (structure and functioning of the female and male reproductive systems, sexually transmitted infections, fertility and ways of preventing pregnancy) among young adults. The results showed that a high percentage of respondents have misconceptions that may promote risky sexual behaviour. For example, more than half of the respondents hold the misconception that the use of condoms prevents the risk of contracting sexually transmitted infections; nearly one in three women and one in four men incorrectly believe that oral sex cannot lead to STI; and more than one-third of the respondents view coitus interruptus as an effective method of preventing pregnancy. The respondents' sexual activity did not moderate the results. In almost all questions, pupils who could attend EFL classes at secondary school but did not so do even once scored better. The pupils (8%) who had contact with professionals outside of school as a source of information had more excellent knowledge about human sexuality than their peers. The same applies to young people who read youth and pro-health magazines and those who obtained knowledge about sexuality from teachers other than EFL teachers (Bulkowski et al., 2015).

Where young people get their sexuality knowledge from

The three sources of information on human sexuality most often mentioned by young people are peers, family life education teachers, and parents. Young people learn about sexuality most often from each other, and they gain knowledge from online portals, magazines, and pornographic content, all of which are diverse in terms of the values they represent (Bulkowski et al., 2015). Among boys, pornographic films are cited as the fourth most important source of knowledge about sexuality. Unfortunately, contact with pornographic content can be a source of inferiority and can lead to misconceptions about relationships and human sexual responses (Pilarczyk, 2018). Among girls, women's and health magazines are fourth in the hierarchy (Bulkowski et al., 2015). On the one hand, many sexual health professionals contribute to social media; on the other hand, there are many sites spreading misinformation about sexuality, thus creating unrealistic expectations.

⁴ Retrieved from: <https://ponton.org.pl/raporty/>

NGOs such as "Ponton", "Spunk", "Jaskółka", "Navigator", and "IFMSA Poland" sex education groups, and students of higher education institutions are working on behalf of reliable sexual education. However, due to limited opportunities, they usually offer short meetings or phone advice in critical situations. In recent years, there has also been Anja Rubik's *sexed.pl* initiative, which promotes knowledge about sexuality for youngsters and adults in an attractive way and with the participation of celebrities. In recent years, numerous grassroots activities aimed at supporting LGBT+ people have also emerged (e.g., "Tolerado", "Stonewall Group", or "Campaign Against Homophobia"). They conduct educational activities, support groups and various other promotional activities. Even though these initiatives are valuable in terms of content, access to them is minimal. People from smaller towns or with fewer cultural resources are particularly vulnerable to exclusion in the context of sound sex education.

Purpose of the study

Given the increasing role of grassroots initiatives and the increasing difficulty of accessing valuable, factually correct information about sexuality in schools, it is vital to determine what kind of content young people currently need and where they can find it. Knowing what information is sought and the most convenient ways of obtaining it can help design both a channel and content with a broader reach and impact than the initiatives described above.

Method

The survey was conducted using an online questionnaire and was distributed in Facebook groups using the snowball method. The survey consisted of 2 metric questions (gender and age), one closed question and three open questions related to sought-for sexual knowledge:

1. What sexuality-related question did you want to be answered recently?
2. Were you able to get an answer to this question?
3. Where were you able to find the answer to your question? Provide sources of information.
4. If you regularly use available sources of sexuality knowledge, such as Instagram, Facebook, YouTube, blogs, newspapers, books, TV shows, podcasts, et cetera., provide their names.

Study group

Four hundred twenty people responded to the survey. Responses from minors were excluded as the survey required adult participation due to the difficulty of obtaining consent from a minor's guardian in an anonymous online survey. The study was anonymous, assumed no significant risk of subject discomfort, and included adult participants. Therefore, the local ethics committee (SWPS University) waived the requirement for approval. Each participant was informed that he or she could withdraw from participation at any study stage without any consequences. Responses from people over 30 years old were also removed as the survey was designed to identify the educational needs of young adults who experienced problems with sound sex education in schools between 2000 and 2020, a period of increasing conservative political influence on the design of sex education.

The final sample consisted of 341 individuals aged 18–30 years ($M = 21.6$, $SD = 3.00$), including 280 females (82.1%), 55 males (16.1%), and 6 (1.8%) individuals who identified their gender as other. Twenty-five individuals indicated that they had not recently sought answers to any question about sex. The remaining 316 participants indicated 345 questions about sexuality to which they had recently sought answers.

Thematic analysis

The researchers conducted a thematic analysis of the responses given by the respondents, following Braun and Clarke's six-phase framework (Brown & Clarke, 2006). In the first step, the responses were divided into five sections, 1 section for each researcher. Each researcher reviewed her data set and independently created codes. The authors then discussed the codes as a group and identified the main topics (1st-order codes), themes (based on 2nd-order codes) and sub-themes (based on 3rd-order codes), thus creating a code tree. The code names and definitions were precisely described and agreed on.

In the second step of the analysis, four researchers (IM, JB, JN, SL) independently identified all responses using an agreed pool of codes. One person's response could receive more than one code. It occurred primarily when the participants gave several problems/questions in one response.

The fifth researcher (KGM) assigned a final code to each response (or, in some cases, two final codes). When at least two researchers assigned the same code, this code remained the final one.

The coding convergence rate of the four researchers was determined by four identical indications of a second-level code (a theme) for a particular respond-

ent's answer, and it was 63.3%. It means that out of 316 coded responses, in 200 cases, all four researchers gave the same code on at least the second level of the coding tree, e.g., health (1st level) -> drugs/medication (2nd level). In 54 responses (17.1% of the responses), three researchers assigned the same code; in 58 cases (18.3% of the responses), two researchers assigned the same code (where the other two researchers may have assigned a standard code or two different codes). In the four remaining cases, where four researchers suggested four different second-level codes, the code was discussed in a group, and a shared decision was made about the final coding.

Five main topics (based on 1st-order codes) emerged: Sexual Activity, Health, Socio-Cultural Knowledge, Psychology and Relationships, and Pleasure; these initially consisted of 29 themes (based on 2nd-order codes) and 19 subthemes (based on 3rd-order codes). After the second step of the analysis, for the sake of greater clarity, it was decided to group some of the codes that occurred only once into the typical "other" category, e.g., "long-distance relationship", which occurred only once in "psychology and relationships -> long-distance relationship", was eventually coded as "psychology and relationships -> other". This process resulted in 5 topics consisting of 28 themes and 17 subthemes.

Findings

Sought information

The most frequently sought information was issues related to health, mainly contraception (both female, which was most often hormonal, and male, which was most often condoms) and Anatomy and functioning of the body. In the latter two cases, the questions mainly concerned the structure of the female genital organs (e.g., hymen, vaginal depth, "normal" size of labia, and location of the G-spot). In addition, female ejaculation, sex during menstruation and delayed menstruation were frequently raised. Questions about male sexual functioning most often concerned sexual dysfunction (erectile dysfunction and premature ejaculation) and questions about pre-ejaculation. Other questions in the Health topic included the probability of getting pregnant during various sexual activities (unwanted pregnancy) and problems with getting pregnant (wanted pregnancy). There were also multiple questions about the possibility of getting infected with STIs during various activities and methods of testing for STIs. Additional questions were related to menstrual cups, lube use, the effect of pregnancy and childbirth on sex, and pain dysfunction in women.

In the Sexual Activity theme, many people were looking for information about anal sex: preparing for it from the safety and hygiene side and information

about dealing with pain during it. Other questions on this topic included oral sex, ways of making sex more interesting with toys, and kinky sex.

In the Pleasure topic, a significant number of questions concerned the lack of pleasure from sex, even though this topic was raised only by women aged 18–22. There were also many questions about the lack of orgasm during penetration, the distinction between clitoral and vaginal orgasm, and ways to practice reaching orgasm or satisfying the partner.

In the Relationships topic, the most frequent themes were low libido and the factors determining its level, desire discrepancy between partners and its impact on a relationship. Other questions regarded sexual violence, how to recognize it in the context of a relationship, and the role of emotions in sexuality.

In the Socio-cultural topic, there were many questions about sexual phenomena and labels related to gender identity and the direction of sexual or romantic attraction, e.g., non-binarity, pansexuality, polyamory, xeno-sexuality, and cis-sexuality. In particular, the themes of trans-genderism (in the context of understanding and communicating with transgender people), as well as asexuality and homosexuality (in the context of learning about oneself), were frequently raised. All the topics and themes are listed in Table 1.

74.1% of participants had had their questions answered; 18.7% said they had not found the answer; the rest had not recently sought answers to questions about sexuality. 96.1%. Of those who had found an answer indicated the source of information. Of those who did not find an answer, only 15.4% (10 people) indicated the sources where they tried to get the answer. These were usually websites and, in 2 cases, friends.

Table 1
Topics, themes and subthemes with example questions

Topic	Theme	Subtheme	Example of a question	Frequency
Sexual activity	initiation	-	How to prepare for the "first time"?	3
	kink/fetish	-	How to spice up gentle BDSM?	6
	masturbation	-	Does masturbation worsen intercourse with your partner?	4
	penetration	-	Why don't I feel anything during penetration?	2
	sex positions	-	What are Christian sex positions?	5
	anal sex	-	Is an enema necessary before anal sex?	19
	oral sex	-	How do I start oral sex?	4

Table 1 (cont.)

Topic	Theme	Subtheme	Example of a question	Frequency
Sexual activity	toys	-	Is there a risk of becoming addicted to vibrators?	10
	other	-	What is a "rainbow kiss"?	1
Health	anatomy & physiology	women's	Does female ejaculation exist?	31
		men's	Can a penis break?	10
		other	Reasons for decreased libido.	6
	contraception	types	Health effects of hormonal contraception.	17
		effectiveness	What is the most practical combination of contraception types?	10
		morning-after pill	How do I get emergency contraception (the morning-after pill)?	4
		other	How should I protect myself during anal sex?	37
	infections	-	STD testing (types, cost)	14
	pregnancy/fertility	-	Possibility of fertilization without penetration.	15
	wellness	-	What does a visit to a sexologist look like?	7
	dysfunctions	-	What should I do if I have pain during intercourse?	8
	treatment/drugs	vaginismus	How to treat vaginismus?	2
		-	Effects of SSRI drugs on the experience of pleasure during sex.	2
other	-	Are there foods I can eat to make my intimate areas taste better?	11	
Socio-Cultural Knowledge	sex and gender norms	-	What does it mean that someone is cisgender?	7
	norms	-	Am I the only one who cries after sex?	9
	problematic behaviour/preferences	-	Am I addicted to pornography?	4
	identity and orientation	LGB	Is it ok among gay men if one never wants to be passive?	6
		asexuality	Can asexual people also feel the need/joy of masturbation?	5

Table 1 (cont.)

Topic	Theme	Subtheme	Example of a question	Frequency
Socio-Cultural Knowledge	identity and orientation	polyamory	Can I be polyamorous?	2
		transgender	How do you refer to a trans person?	5
		other	Are there heterosexual people who do not like sex?	11
	other	-	I wanted to learn more about the sexuality of people with disabilities.	5
Psychology & Relationships	quality of sex life	attractiveness	Am I at least a bit attractive?	2
		desire and desire discrepancy	Why do I not feel like having sex with my partner?	12
		psychological problems	How do you not mentally block yourself sexually?	4
		other	How does sex affect life satisfaction?	2
	relationship communication	-	How to talk to your partner without shame about sex fantasies?	3
	violence, trauma, rape	-	Can rape happen in a relationship? How do I understand it, and what steps should I take?	2
	emotions in a relationship	-	Do I meet my partner's expectations?	5
Pleasure (2)	other	-	Traumas associated with pornography and being in a long-distance relationship.	3
	orgasm	-	How to bring a woman to orgasm?	22
	lack of pleasure	-	Why does sex hurt and does not feel good?	8

Sources of sexual knowledge

The respondents most often searched for information on the Internet: through search engines, social media (Facebook, Instagram, TikTok), websites specifically dedicated to the search topic (medical portals, doctors' blogs, websites and forums dedicated to sexuality), or YouTube. Other sources were mentioned less frequently, including books and trusted persons such as friends, acquaintances, family, partners, and gynaecologists—a few indications concerned television and newspapers.

Table 2 presents the source indications. Frequencies are not aggregated; for example, the keyword "internet" does not include the frequency of the keywords "Forum," "Portal," "YouTube," et cetera. In 109 cases, the answer was "internet" (or "search engine" or "Google") with no specification of what type of site the respondent ultimately accessed. If the specific name of a portal/app/group, et cetera., was given, it was coded below as it was given, also without aggregating the frequency, e.g., if someone gave the source name "Sypialniawka" ("Bedroom"), which is a Facebook group, it was coded only under its specific name in Table 3. It did not saturate the theme "Facebook" in Table 2. This solution was dictated by the difficulty in estimating the channel for sources with multiple channels (e.g., "sexed.pl" can refer simultaneously to a website, Instagram, book, and TV campaign).

In Table 2, we have listed the channels indicated by the respondents for acquiring information; in Table 3, we have listed the specific names of the sources.

Table 2

Indications of information acquisition channel (when respondents did not indicate a specific source name)

Source – channel	Specific indications	Frequency of indication
Internet, google, search engine	Internet (Google search engine)	109
	forums	16
	medical portals	15
	YouTube	13
	blogs	7
	Wikipedia	6
	pornography	1
Social media	Facebook	29
	Instagram	43
	TikTok	3
People	gynaecologist	13
	colleague, friend, close person	9
	doctor	7
	family	5
	partner	4
	others	3
Other sources	books	13
	research papers	6
	flyer	2
	TV	3
	Church	2
	newspaper	1

Table 3

Indications of a specific source name (whether or not respondents indicated the channel of that source)

Source – channel	Channel indications	Frequency of indication
Kasia "co z tym seksem"	Instagram & app	30
sexed.pl	book, Instagram, webpage	10
Sypialniawska	Facebook Group	9
Bez Tabu	-	4
Stonewall	YouTube	2

Discussion

The survey was designed to identify the questions and concerns of young adults in Poland who have experienced a lack of systemic sex education in schools. The survey indicated that a significant proportion of questions concerned fundamental issues related to bodily functions, sexually transmitted infections, and contraception, all of which are areas that fall under sexual education program types B and C. There is a lack of this content in Polish education, which (if it exists at all) most resembles a program focused on sexual abstinence). The problematic situation concerning reproductive issues (including access to abortion and contraception) is a result of changes in Polish law which have taken place during the last decade. Abortion has become almost wholly forbidden, which also translates into a lack of transfer of knowledge about it (about both the methods and the dangers of abortion performed in inappropriate conditions) to a broader group of people than just future doctors. Information about grassroots initiatives of women helping each other to have safe abortions abroad mainly reaches highly educated people who are involved in women's issues, leaving a significant group of women excluded from this information. The situation regarding emergency contraception, currently available (since 01.05.2024) in Poland by so-called "pharmacy prescription", is also problematic, as there are uncertainties about the legal status of prescribing it to women between 15 and 18 years old⁵ and the trial nature of distribution, involving only a proportion of pharmacies. Many pharmacies do not have the drugs on sale regularly, which limits access, especially for women in smaller towns and rural areas and for the less affluent. Good educational programs should take into account these systemic limitations: they should target very different groups of young people and provide information about grassroots initiatives involving

⁵ Retrieved from: <https://www.pap.pl/aktualnosci/w-srode-wchodzi-w-zycie-rozporzadzenie-w-sprawie-pigulki-dzien-po-0>

contraception and abortion, ways of obtaining financial support, and the scope of Polish law (including the lack of a penalty in the case of self-administration of abortion pills).

On the one hand, many of the questions relating to gender, sexual, and relational identities indicate a remarkable need for education about the meaning of GSRD labels (such as polyamory, cisgender, et cetera.); on the other hand, these questions concern training in social skills such as appropriate communication with non-binary and transgender people. Some respondents indicated that questions about identity and the confusion about these issues call for initiatives beyond the typical information provision. Psychological counselling should also be offered for those with doubts about the direction of their attractions and those seeking answers to the question of whether, as one respondent put it, "I am normal".

Similarly, the topic of sexual dysfunction and relational problems would require interventions other than purely informational ones. Respondents often asked about the problem of desire discrepancy and low desire, which may suggest the presence of other kinds of relational and individual problems reflected in or resulting from decreased desire. The primary source of information (the Internet) is not a place where it is easy to find an adequate answer; neither does it reveal the complexity of the problem of desire, the multifactorial sources of discrepancy and loss of desire, and, above all, it does not discuss several relational problems related to desire. It is easy to be a target of internet advertisements for drugs and techniques of questionable effectiveness and safety (Grunt-Mejer, 2022). The same problem applies to the questions raised by the respondents about erectile dysfunction, rapid ejaculation, and pain during intercourse. Additionally, special attention in the planning of educational initiatives should be devoted to the issue of violence: from preventive actions that are primarily aimed at training in respecting other people's boundaries, communication (clear expression and respect of consent and signs of lack of consent) and awareness that consent applies equally to newly met people and those in stable relationships, to actions helping people who have experienced violence (how to report it and where to seek psychological and medical support).

At the same time, some of the questions (e.g., persistent questions about anal sex and female ejaculation) can be interpreted as a sign of the influence of pornography and the sexual scripts that pornography promotes. It means that the planning of grassroots educational interventions should also include content typically not included in basic sex education curricula and should be based on ongoing research into the needs of young people. Questions related to pornography also addressed the fear of sexual addiction and the effects of pornography on relationships. Research on this issue indicates that pornography leads to a range of effects, depending on the context of its use (Koletić et al. 2021): mes-

sages about positive effects and adverse consequences should, therefore, be nuanced and should take into account that a significant proportion of men and women use internet pornography and that the number of users rises with the ever-increasing availability of such material. It calls for honest, non-dogmatic messages about how to make pornography safer to use, about the differences between sexuality on screen and in real life, and where and when to seek help if someone's use of pornography is out of control.

Sources of obtaining information indicate the dominant role of the Internet, which is popular due to its low cost, 24-hour availability, and relative anonymity, all of which allow the exploration of topics which young people would be ashamed to ask about if using other forms of communication. When planning educational activities, it is worth taking into account these advantages and using the formula of anonymous consultations on more complex issues or – in the case of planning classroom training – by collecting questions and problems from participants anonymously beforehand.

Knowing what kinds of sites and media are most frequently visited to look for answers can inspire the design of message content, forms of information delivery, and channels. For example, the Kasia "co z tym seksem" (Kate "What About This Sex") website and app, which were cited most often by respondents, raise issues of safe sexual initiation, anal sex, and informed consent, all of which are topics that our respondents also identified as necessary.

Limitations of the study

The first limitation of the study is that it was impossible to include responses from underage participants as this would require permission from legal guardians and thus prevent total anonymity. Collecting data on the sex education needs of younger people in another study is highly recommended. Another limitation is the unrepresentativeness and small sample size; these were caused by the fact that the survey (a snowballing link distributed through student organizations and social media focused on sexuality topics) was likely to reach primarily college students and those who are better educated. Thus, they already have more excellent knowledge of sexuality than the average young adult. Fewer responses came from men, so the needs of this group may be less well reflected in the results than women's. Given these limitations, it is essential to gather additional information before creating educational content regarding educational needs and specific problems and questions that a particular target group may have.

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Co młodzi ludzie chcą wiedzieć o seksie i gdzie szukają odpowiedzi? Studium przypadku w Polsce

Streszczenie

W badaniu wzięło udział 341 osób w wieku 18–30 lat, które odpowiedziały na następujące pytania: Na jakie pytanie związane z seksualnością ostatnio chciałeś uzyskać odpowiedź? Czy udało Ci się uzyskać odpowiedź na to pytanie? Gdzie próbowałeś znaleźć odpowiedź na swoje pytanie? Sprawdzone także źródła wiedzy o seksualności, które respondenci cenią. Odpowiedzi poddano analizie tematycznej.

Analiza odpowiedzi ujawniła pięć głównych tematów obejmujących 39 tematów. Tematyka dotyczyła zdrowia seksualnego (najczęściej poszukiwane odpowiedzi dotyczyły antykoncepcji, fizjologii i anatomii), aktywności seksualnej (najczęstsze pytanie dotyczyło seksu analnego), przyjemności seksualnej (najczęstszy temat dotyczył orgazmu), psychologii i związków (najczęstszy temat dotyczył seksu analnego). Dotyczyła też jakości pożądania i seksu w długotrwałych związkach oraz wiedzy społeczno-kulturowej (dominujący wątek dotyczył tożsamości płciowej i orientacji seksualnej). Najczęstszym źródłem wiedzy jest Internet, głównie media społecznościowe.

Wyniki wskazują na duże zapotrzebowanie na edukację – już na poziomie podstawowym – z anatomii, fizjologii i antykoncepcji. Dominują także pytania związane z wpływem pornografii i koniecznością zrozumienia przez respondentów szybkich zmian społecznych, w tym różnorodnych orientacji i tożsamości.

Słowa kluczowe: edukacja seksualna, konserwatyzm, polityka, Polska, Europa Wschodnia, młodzi dorośli.