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Addressing Subjective Experiences of Sexuality-related Social Exclusion Through Education

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ABSTRACT

Despite the prevailing perception that sexuality should be openly discussed, sexuality-related social exclusion persists, posing challenges for individuals. This mixed-methods study explores the perception of sexuality-related social exclusion experiences in young adults, identifying strategies within sexuality education to mitigate these challenges. The convenient sample included 167 students (18-25 years) in Lithuania. The study reveals that when young adults perceive the reason for their social exclusion experiences to be cultural rather than personal, they usually assign little significance to them. In addition, gender-specific experiences of sexuality-related social exclusion are identified. While the study is only exploratory, the results suggest that parents are incapable of preventing sexuality-related social exclusion alone. Sexuality education emerges as a crucial tool in addressing these challenges.

Keywords: self-evaluation, sex education, sexuality, social exclusion, youth

INTRODUCTION

Sexuality education is implemented negligently in various countries around the world (UNESCO, 2019; UNFPA, 2014). Lack of information and values education (also called character education) has resulted in school-age children and adolescents being exposed to emotional and psychological difficulties, the risk of sexual abuse or violence, and social exclusion (Goldfarb & Lieberman, 2021;

Szucs et al., 2022). Socialized in conservative environments without access to science-based information on sexuality, girls are more likely to be sexually abused (Barker & Galliher, 2020) and to suffer from STDs (Craig-Kuhn et al., 2021). In addition, pupils who have little or no communication with their parents/guardians and if their communication is non-constructive are at even higher risk of social exclusion (Mulholland et al., 2021). All these experiences and more are conceptualized in this article as sexuality-related social exclusion, a phenomenon that we understand as an 'experience of being kept or keeping oneself apart from others physically or emotionally in the context of sexuality' (roughly based on Wesselmann et al., 2016, p. 5).

Not being able to get the needed information about sexuality, pupils are looking for it online. Litsou et al. (2021) note that students turn to pornographic videos to learn and avoid social exclusion due to lack of information. This is particularly dangerous given that pornography depicts unrealistic content of interpersonal and sexual relationships (Owens et al., 2012). As a solution, researchers point to sexuality education: Su et al. (2020) conducted a quasi-experiment and found that high-quality sexuality education positively contributes to students' social development by reducing social differences within groups, increasing egalitarianism in collaborative work and social decision-making.

However, students experiencing sexuality-related social exclusion do not always identify their experiences as such, making it difficult to measure. This has to do with the cultural factors, especially in the school context (Peace, 2001). Also, the excluded individual might deny or even defend their experiences due to internalization of social exclusion (Bytautas & Daukilas, 2024). Little research has been done to explore the psychologization of sexuality-related social exclusion experiences. To fill the gap, two research questions are posed:

1. How do young adults evaluate their sexuality-related social exclusion experiences?
2. What are the possible contributions of school-based sexuality education to addressing these issues?

SOCIAL EXCLUSION AMONG YOUTH

In this section we provide an overview of the different patterns of sexuality-related social exclusion. For the purpose of this study, we have chosen to explore the breadth of the phenomenon at the expense of the depth of the arguments presented. The reader will notice that the experiences we are assigning to sexuality-related social exclusion are very broad.

In the current state of the literature, the experiences that we label as 'sexuality-related social exclusion' are usually explored separately, because they have unique qualities and are observed in different contexts. In putting them together, we offer a novel viewpoint. This viewpoint would be characterized by the focus on social exclusion internalization resulting from or causing the different

marginalizing experiences. To capture the broadness of the phenomenon of sexuality-related social exclusion we adapt the definition of Berman & Phillips (2000) to our context – it is a phenomenon characterized by experiences of the sexuality domain that cause or result from relational issues, such as inadequate participation, lack of social integration, and lack of power; these experiences distort the perception of belonging and leave individuals stranded in a "social no-man's land".

Sexuality-related bullying

In recent years, 'coming out' as a disclosure of non-normative identity (mostly sexual) has drawn researcher attention as it is getting more and more prevalent among adolescents (Sandler, 2022). The disclosed identity may sometimes be as insignificant as the preference of certain outfit (such as a turtleneck or tight jeans for boys) or having gender non-conforming hobbies, but it may also be related to sexual orientation. However, in every instance 'coming out' requires a favorable social environment. If it is not available, adolescents with atypical sexual orientations are at risk of school avoidance, self-harm, and suicide when they are bullied in school (Rivers, 2000). Unfortunately, according to Giniotaitė (2018), not all schools are supportive of students with atypical sexual orientations:

> *Homophobic bullying tends to be naturalized and treated as normal childhood behavior. When homosexuality is brought up, the limits of tolerance of some teachers have become apparent, where coming out at school is seen in a negative light, sexualizing homosexuality by highlighting the importance of erotic feelings, the sexual act, rather than the emotional/psychological qualities of the person. (Giniotaitė, 2018, p. 124).*

This position of teachers does not prevent bullying. On the contrary, it informally contributes to it (MacAulay et al., 2022).

Sexual harassment

Sexual bullying in schools often turns into sexual harassment. Skipper & Fox (2021) point to students' desire to conform to various gender stereotypes, especially those related to masculinity, as a reason for this phenomenon: 'Research has shown the influence of the peer group in reinforcing hegemonic masculinity and gender stereotypes. One way the peer group can reinforce these gender norms is through bullying and harassment.' (Skipper & Fox 2021, p. 393). Sexual harassment in schools takes both verbal and physical forms (Harris & Kruger, 2020). On top of that, the normalization of sexual harassment at school leads to an increase in sexual abuse in early adulthood, thus creating an even greater social exclusion between vulnerable individuals and society (Brown et al., 2020).

Physical sexual abuse

Despite sexual harassment having strong psychosocial effects, sexual abuse has been identified to directly impact the development of depression and post-traumatic stress disorder (Aydin et al., 2016). As Bytautas & Daukilas (2024) argue, such experiences are internalized by individuals and resurface in everyday situations, causing self-isolation. Sexual abuse has been most widely studied as a childhood experience (Amado et al., 2015; Assink et al., 2019; Azzopardi et al., 2019; Ma, 2018). However, the victims of sexual abuse are not the only ones associated with social exclusion; a similar relation is found among the perpetrators. Child sexual abuse perpetrators are often of low socio-economic status (Hilarski, 2012; Sinanan, 2011; Usta & Farver, 2010), have depressive or anxiety symptoms (Carlstedt et al., 2009). Miner et al. (2009) argued that among juvenile offenders, most have social problems such as rejection by peers and lack of intimate relationships. A similar situation was observed among the parents of the perpetrators. They are usually poorly adapted, with high family cohesion levels (Ronis & Borduin, 2007).

Image-based sexual abuse

In recent years, there has been a growing rate of image-based sexual abuse, with the victim rates of up to one third in western countries (Powell et al., 2020). It usually includes a sexual or romantic partner taking images or filming footage of sexually explicit content with, without consent, or even against the victim's will and sharing it publicly (sexual defamation) or threatening to do so (sexual blackmail) (Henry et al., 2017). This form of sexual abuse has a particularly marginalizing nature, as the victim is either rejected by acquaintances, or is forced to put up to the demands of the perpetrator, usually becoming trapped in an abusive relationship (Naezer & van Oosterhout, 2020).

Abuse partners might also upload the sexual footage to a pornography site. Vera-Gray et al. (2021) found that notions of non-consensual pornographic material such as 'hidden cam', 'spy cam', or 'revenge porn' are a popular theme in the titles of pornographic videos. It is widely known that some of them are in fact non-consensual (Marshall et al., 2018). In addition, there is the growing problem of publicly available child sexual abuse material (CSAM), with the prevailing form being willingly shared images (sexting) made public (Mori et al., 2022). Even though CSAM existed well before the Internet (Quayle & Taylor, 2002), it has made CSAM distribution much easier and consequence-free (Kloess et al., 2014). One can never know if the sexual footage sent to a partner will not land in a pornographic site. And then, it is almost impossible to permanently take the content down (McKee & Lumby, 2022), leaving the victims with innumerable lifelong psychosocial consequences (De Angeli et al., 2023; Eaton & McGlynn, 2020; Henry et al., 2020).

Problematic usage of pornography

Research shows that pornography has marginalizing effects for the consumers as well as for the actors (voluntary or not). Pornography is known to cause addiction and compulsive behavior (Rousseau et al., 2021), and psychological distress due to moral incongruence (Kraus & Sweeney, 2019). The growing rates of pornography consumption have resulted in the formation of a newly recognized community of involuntary celibates (incels) (Byerly, 2020). Here, pornography is related in two ways: it distracts incels from real-life social encounters, at the same time arousing sexual desires (Hesse & Floyd, 2019; Leonhardt et al., 2021). In a romantic relationship pornography usage or the extent of it is often hidden or lied about to the partner, contributing to couple conflicts and emotional exclusion (Szymanski & Stewart-Richardson, 2014). In addition, pornography consumption is associated with higher rates of infidelity (Rasmussen, 2016).

Denial of sexuality education

Another form of sexuality-related social exclusion emerges when pupils are denied access to quality sexuality education. Above all, this situation touches the ones who are already socially excluded, as they are left without the opportunity to develop their sexual competences, and get their questions answered. The gap in social exclusion is thus widened, jeopardizing the social development of these individuals. Baccara & Yariv (2013) explained this by putting forward social belonging: a student who does not share the same sexual literacy as peers finds it difficult to build social relationships with them.

Recently, the phenomenon of sexuality education for people with intellectual disabilities has attracted research attention (Schaafsma et al., 2015). This is a particularly pressing issue as students with intellectual disabilities around the world do not have access to quality sexuality education (McDaniels & Fleming, 2016). Murphy & Elias (2006) argue that such students are mistakenly perceived as asexual, hypersexual, or sexually immature. Without the required education, these students are at a higher risk of experiencing abuse, contracting STDs, or becoming unintentionally pregnant (McCann et al., 2019).

The situation is similar for pupils with physical disabilities. According to East & Orchard (2014), a phenomenon of responsibility deflection and diversion is observed in the education system, whereby it is assumed that the sexuality education of physically disabled people should be provided by a professional with better expertise. Hence, these students are often excluded from sexuality education activities in the belief that this will protect them from sensitive and frustrating topics (East & Orchard, 2014).

Sexuality-related intergroup exclusion

Interestingly, sexuality-related social exclusion is also prevalent in friendly relationships. Firstly, the development of gender identity usually

influences intergroup exclusion, as boys and girls tend to separate from each other (Carlile, 2009). This separation occurs already in early childhood and creates differences in values and behavior (Knafo & Spinath, 2011). Having experienced a long-term intergroup exclusion, a curious phenomenon occurs when teenagers begin dating each other. This often results in negative experiences, aggravating their intergroup exclusion (Reed et al., 2020). Furthermore, friends of the same gender tend to betray each other to prevent their relationship from obtaining romantic appearance (Felmlee et al., 2012). This situation is even more significant in hetero-normative socio-cultural contexts (Ravnholt Christensen, 2022).

Controlling and manipulative romantic relationships

Social exclusion can also take place because of a romantic relationship. First of all, romantic relationships are culturally associated with intimacy and with giving priority to the partner in comparison to friends (Rokach, 2024). Such prioritization is especially frequent among adolescent couples (Camirand & Poulin, 2019). Simply by shifting social priorities, a person excludes themself from most of the social circles. This may not pose any psycho-social threats if the partner responds in a similar manner. However, due to an insecure attachment or low self-esteem, partners in romantic relationships often make use of manipulative behavior to gain control over the other (Overall, 2019). In this situation, the victim (or victims, as both partners may behave manipulatory) is kept apart emotionally, and thus, is socially excluded.

Intra-family social exclusion

Throughout adolescence, parents continue to play a significant role in psychological distress management, especially for girls (Drapeau et al., 2011). However, one of the principal tasks in the developmental stage of adolescence is gaining independence from parents. Often, this results in parent-adolescent sexual communication insufficiency, with perceived behavioral control being among the three most important reasons (Schouten et al., 2007). This way, the quest for independence involves weakening the emotional bond with parents, and an adolescent may willingly socially exclude themself from the core family.

Material deprivation

Material deprivation has been widely associated with low contraception usage (Bailey et al., 2022). However, most of the interventions with contraception price as the controlled variable have failed to provide long-standing effects (Korachais et al., 2016). Korachais et al. (2016) suggest that the determining factor in this situation is not the material deprivation itself, but the lack of education and social maladjustment. Another factor may be the relative nature of deprivation. It is not the actual economic conditions that are important for an individual, but the conditions in relation to other people (Kim, 2021).

Teenage pregnancy

Yet another form of sexuality-related social exclusion is teenage pregnancy. According to Bonell et al. (2003), it is social exclusion that often leads to early sexual debut and teenager pregnancy. However, their study found that teenage pregnancy itself rarely causes social exclusion. Moreover, most teenage mothers see their experience positively, not considering it a problem. With teenage pregnancy being only one of the symptoms, it is important to address social exclusion itself by increasing satisfaction with school, improving the quality of sexuality education, and preventing domestic violence (Wiggins et al., 2005).

RESEARCH METHOD

Study design

In this study, we decided to follow a mixed methods procedure. Explanatory sequential mixed methods research strategy was chosen, that allowed contextualizing the primary data (quantitative) with qualitative explanations (Creswell & Creswell, 2018). As Plano Clark & Ivankova (2016) put it, an 'advanced application' (p. 136) of intersecting a secondary (qualitative) method within a primary quantitative research design was applied. This application allows an atypical data presentation structure: instead of presenting quantitative and qualitative findings in a successive manner, qualitative comments can be inserted into the principal quantitative data (Plano Clark & Ivankova, 2016).

The research instrument is based on the categorization of social exclusion by Jehoel-Gijsbers & Vrooman (2007) in two dimensions: the economic/structural (distributional) and the socio-cultural (relational); distinguished by four characteristics: material deprivation, inadequate access to government and semi-government provisions ('social rights'), insufficient social integration and insufficient cultural integration. In designing the questionnaire, we also recognized the newly proposed concept of internalized social exclusion (Bytautas & Daukilas, 2024). There was no intent to measure the prevalence of sexuality-related social exclusion, but rather the subjectivity in deciding whether an individual has experienced the social exclusion experiences or not.

Study sample and recruitment

The quantitative study involved young adults (18-25 years) studying at different educational institutions in Lithuania. These criterions were decided upon so that respondents of the study would have relevant contact with educational context and be able to provide contextualized social exclusion data. The minimum age of 18 was chosen on ethical grounds, as the questionnaire includes sensitive questions. Due to the sensitivity of the research topic, the respondents for the quantitative study were sought conveniently in cooperation with several educational institutions (1 vocational school, 1 high school and 1 university

faculty); they filled the questionnaires with the researcher (MB) in the classroom. In total 167 participants completed the questionnaire (of whom 30 questionnaires were rejected). Social exclusion experience was not evaluated before the study; therefore, the results were expected to be diverse, mostly showing low social exclusion scores. The socio-demographic data of the respondents are shown in Table 1.

After the quantitative data was collected, an invitation was forwarded to the respondents to participate in an interview. However, this time the criterion of participation was the presence of direct sexuality-related social exclusion experiences. 4 students (3 female, 1 male) responded positively and participated in the following interviews. The sample size of 4 is not considered a flaw by us, as qualitative data was collected only for contextual reasons.

Table 1: Respondents' Socio-demographics

Criterion	Values				
Age	*18-19 yrs.*	*20-21 yrs.*	*22-23 yrs.*	*24-25 yrs.*	
	63 (46.0%)	29 (21.1%)	21 (15.4%)	24 (17.5%)	
Type of school last attended	*High school*	*Vocational school*	*HEI*		
	36 (26.3%)	38 (27.7%)	63 (46.0%)		
Place of origin	*Rural area*	*Town*	*District centre*	*Large city*	
	25 (18.2%)	39 (28.5%)	5 (3.6%)	68 (49.6%)	
Household income per capita, €/month	*<400*	*400-600*	*600-800*	*800-1000*	*>1000*
	28 (20.4%)	26 (19.0%)	23 (16.8%)	28 (20.4%)	30 (21.9%)
Gender	*Female*		*Male*		
	73 (53.3%)		64 (46.7%)		
Sexual orientation	*Heterosexual*		*Non-heterosexual*		
	125 (91.4%)		12 (8.6%)		

Data collection

The questionnaire was developed by tailoring the examples of sexuality-related social exclusion described in the literature to the social exclusion theory of Jehoel-Gijsbers & Vrooman (2007). The following indicators were identified (Table 2). These indicators were measured by respondent self-evaluation of various related statements. We tried to grasp the subjective nature of evaluating own experiences of social exclusion, therefore the presence of such experiences was measured in a 5-point Likert scale. However, no subscales were made as this study has no claims to the validity of social exclusion measurements, but instead explores the self-evaluation dynamics. The statements were grouped by topics and contexts (social exclusion experiences at home, at school, outside of school, in relation to friends and classmates, to romantic and sexual partners, to finances, and

to cultural expectations). An attempt was made to also measure the internalized social exclusion through statements related to personality, social environment perception, and congruence of the two (Bytautas & Daukilas, 2024).

Table 2: The Indicators of Sexuality-related Social Exclusion through the Categorization of Jehoel-Gijsbers & Vrooman (2007)

Dimension	Characteristic	Indicators
Economic/ structural exclusion (distributional)	Material deprivation	Not being financially prepared for an unplanned pregnancy
		Not affording contraception or intimate hygiene products
		Being separated from social activities due to lack of money
	Inadequate access to government and semi-government provisions ('social rights')	Not having enough or having negative experiences of home-based and school-based sexuality education
		Being afraid or discouraged to use the services of a gynaecologist/andrologist
		Having experienced sexual harassment (bullying) at school or outside school*
		Having experienced sexual abuse (including image-based) at school or outside school*
		Having experienced sexual defamation at school or outside school*
		Being exposed to or encouraged to watch pornography at an early age*
Socio-cultural exclusion (relational)	Insufficient social integration	Not having open, intimate, or safe communication with parents or other adults, as well as with peers (not fitting in)
		Having negative experiences of romantic or sexual relationships
	Insufficient cultural integration	Not dressing in accordance with the expectations of others
		Having interests that do not match the expectations of others
		Having attitudes and values about sex that do not align with the attitudes and values of others
		Being addicted to pornography or having a partner who is addicted to pornography

Note. * These indicators are indirectly associated with "inadequate access to government and semi-government provisions" by not having been protected against such experiences.

Respondents received printed questionnaires and completed them under the supervision of the researcher MB. The quantitative research was not aimed at exploring the sexuality education responses to youth social exclusion (the second research question), however understanding the experiences of adolescents allowed reflecting on the possible educational measures. In the qualitative part, the participants were recruited as having experienced specific sexuality-related social exclusion experiences. A semi-structured interview procedure was applied, focusing on the preidentified experiences of interest.

Data analysis

The data from the quantitative study were analyzed using descriptive and comparative analysis. The Wilcoxon Signed-Ranks test was used to compare responses to different questions from the same sample and the Mann-Whitney U test was used to compare unpaired samples. Significance level was $p = 0.05$.

The qualitative data were analyzed using directed qualitative content analysis (DQualCA) method (Hsieh & Shannon, 2005). In applying this method, researchers take preexisting theory or previous research findings as a conceptual framework for the categorization of the data codes (Assarroudi et al., 2018). In our study, the selected framework is equivalent to the one described in the quantitative data analysis part (Table 2). However, as DQualCA was only a secondary method, no generic categories were produced. We applied a simplified analysis procedure: firstly, we extracted the meaning units from the transcribed interviews, codified them, and finally assigned the codes to the predetermined categorization matrix. We must clarify that a sample of 4 participants was not sufficient to saturate the data. Therefore, instead of drawing a results table and drawing conclusions from it, we provide interview excerpts as contextualizations of the primary quantitative data. For this reason, the excerpts are written in italics and indented to the right side.

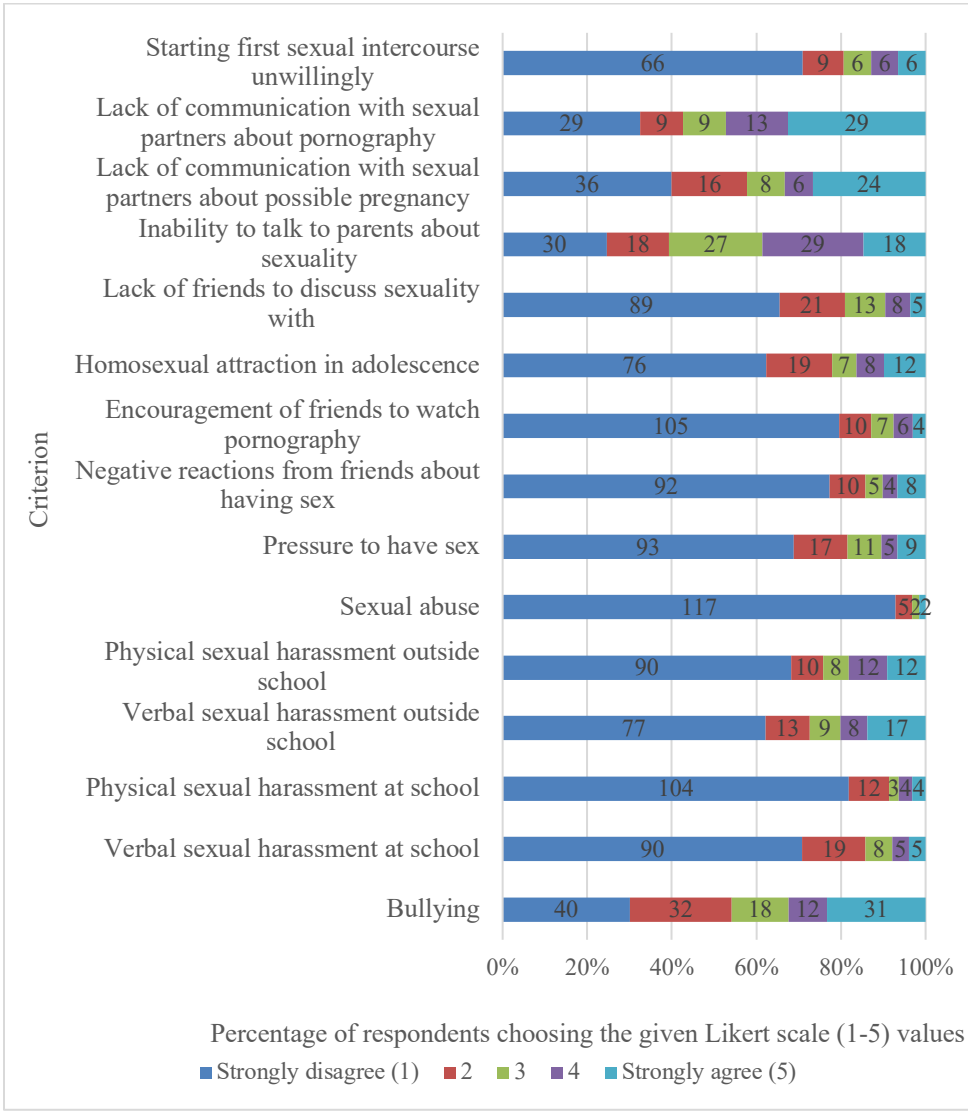
Ethics

The study was performed under the instructions of the Academy of Education Ethics Committee of the researchers' institution and followed all the necessary professional and ethical principles of social science research: interviewees were informed in advance of the study purpose, procedure, the possibility of discontinuation, the risks and benefits of participation, and the confidentiality commitments. They signed an informed consent form for taking part in the research. The quantitative research participants were not pressured to partake, and some of them used the right to discontinue. Participation in the research was restricted to adults.

RESULTS

The research participants were asked to rate the presence of experiences of sexuality-related social exclusion in a 5-point Likert scale (from 1 point for strongly disagreeing to having experienced to 5 points for strongly agreeing to having experienced the described experience) (Figure 1). This served as a tool to learn about the sample and the overall presence of social exclusion experiences.

Figure 1: Respondents' Self-evaluation of the Relevant Experiences of Social Exclusion



As expected, a pattern was observed that the respondents have chosen low response scores (with exceptions to bullying (not related to sexuality) and communication insufficiency). However, after collecting the qualitative data, a curious phenomenon was identified. Despite having experienced the described situations of social exclusion, the 4 interview participants were among those who indicated low social exclusion scores.

Examples illustrating their scores (range 1-5) of the questionnaire responses were thus obtained:

- A participant who had experienced buttock groping at school and in a supermarket: physical sexual harassment at school – 2; outside school – 3.
- A participant who reported having her private parts groped in a school disco even though she had asked to stop, as well as two similar experiences outside school: physical sexual harassment at school – 3; outside school - 5.
- A participant who had experienced thigh-groping in a bar: physical sexual harassment outside school – 4.
- A participant who reported being made drunk and persuaded to have sex in early adolescence: sexual abuse – 2.
- A participant who was introduced to pornography at the age of 12 by a friend and was encouraged to watch it: encouragement from friends to watch pornography – 3.

These data make it reasonable to assume that any rating other than 'strongly disagree (1)' indicates the existence of the experience indicated. Thus, the choice of scores 4 and 5 indicates not only the presence of the experience indicated, but also the importance placed on it.

When the experiences listed in Figure 1 are counted in the women's group, most of the results are even more notable (Table 3). Most of the results are statistically significant and with some of the experiences we detected medium to large effect sizes (especially in evaluating sexual harassment outside school).

> *Mum is overprotective. But on a physical level – when it comes to tidying up, washing up. But on an emotional level, well, she's absent. (4)*

The comparison by gender was also performed to determine the differences in the evaluation of value-based sexuality-related statements (Table 4). As seen in the table, women recognized more value-based problems than men.

> *I was buying pads in a shop and some guys were groping my bottom. I was thirteen. It was scary and maybe a little shameful. I didn't want to buy pads afterwards. (1)*

Table 3: Comparison of the Respondents' Self-evaluation of the Relevant Experiences of Social Exclusion by Gender Using Mann-Whitney U Test

Experiences	Percentage of respondents rating the experience with 2-5 points (other than strongly disagree)		Statistics
	Male	Female	
Verbal sexual harassment at school	14.0	51.4	$p < 0.001$, $r = 0.3$
Physical sexual harassment at school	8.8	25.7	$p = 0.013$, $r = 0.22$
Verbal sexual harassment outside school	16.1	55.9	$p < 0.001$, $r = 0.43$
Physical sexual harassment outside school	11.5	49.3	$p < 0.001$, $r = 0.41$
Sexual abuse	5.2	8.8	$p = 0.414$
Pressure to have sex	27.4	34.2	$p = 0.437$
Negative reactions from friends about having sex	19.6	25.4	$p = 0.366$
Homosexual attraction in adolescence	18.5	52.9	$p < 0.001$, $r = 0.34$
Negative experiences in romantic relationships	57.4	68.4	$p = 0.089$
Anxiety about reproductive health	40.0	64.3	$p = 0.008$, $r = 0.24$
Having been encouraged by parents to find a partner in adolescence	65.0	34.3	$p < 0.001$, $r = 0.34$
Having been encouraged by friends to watch pornography	26.2	15.5	$p = 0.09$

The only statement that was evaluated worse by men is regarding relationship problems arising from pornography usage. However, this is easily explainable by the large difference between men and women in the amount spent watching pornography ($p < 0.001$, $r = 0.5$). In addition, men also report having started their sexual life earlier: average age of first sexual intercourse by men is 16 years and 37 weeks compared to 17 years and 41 weeks by women ($p = 0.005$, $r = 0.29$).

> *I was afraid to say who I am; what my opinion is. Because I was afraid, they would think I was crazy or a nun. Even though I knew I wasn't that. But I knew that they would think so. (1)*

Table 4: Comparison of the Evaluation of Value-based Sexuality-related Statements by Gender Using Mann-Whitney U Test

Statement	An average of statement evaluations in a 5-point Likert scale (range 1-5)		Statistics
	Male	Female	
There was a lack of education in topics on relationships in their school	3.50	4.09	p = 0.011, r = 0.23
Men and women are fundamentally different	3.98	3.65	p = 0.022, r = 0.2
I accept society's values regarding sexuality	3.38	2.98	p = 0.024, r = 0.21
Pornography has caused difficulties in forming romantic relationships	1.95	1.37	p = 0.012, r = 0.25

Some cultural differences in sexuality-related communication were observed between respondents who grew up in large cities and the ones from other locations (Table 5). In addition to the aspects presented in the table, people from large cities report having had more romantic ($p = 0.005$, $r = 0.24$) and sexual partners ($p = 0.064$).

> *I had sex with one person where I felt the influence of pornography because it was very rough, even quite unpleasant for me. There was probably some kind of pornographic scenario being repeated: some kind of wrist grabbing, slapping. All of this took place without my consent. It was a rather shocking experience. (2)*

Another interesting relationship was observed between social exclusion experiences and the presence or not of other children while growing up (Table 6). Young adults who grew up alone reported more significant social exclusion experiences. However, most of the differences were not statistically significant which may be because of a small sample size. Moreover, these individuals are exposed to pornography for the first time at an earlier age ($p = 0.109$), watch pornography more often in adolescence ($p = 0.036$, $r = 0.18$), less likely to consider pornography harmful to relationships of a couple ($p = 0.05$, $r = 0.26$), and less likely to consider themselves as valuable members of the society ($p = 0.123$).

> *Everything was going well, but he suddenly decided to leave me and go back to his ex. And that was very painful for me, we broke up. And after a month or two, I wanted so much to go back to him. But it wasn't love, it*

was just a desire to attach. Because also in my family I had this very strong insecurity. I never had a close contact with my mum or dad. (4)

Table 5: Comparison of the Self-evaluation of Sexuality-related Sociality Experiences by the Location of Respondent Upbringing Using Mann-Whitney U Test

Experiences	An average of experience evaluations in a 5-point Likert scale (range 1-5)		Statistics
	Large cites	Other locations	
Communicating about sexuality with friends	4.68	4.24	$p = 0.011$, $r = 0.22$
Having been pressured to have sex	2.21	1.38	$p < 0.001$, $r = 0.37$
Having received negative reactions from friends for having sex	1.87	1.43	$p = 0.014$, $r = 0.23$
Having been encouraged by friends to watch pornography	1.57	1.29	$p = 0.032$, $r = 0.19$
Having had a negative experience of romantic relationships	2.92	2.29	$p = 0.043$, $r = 0.2$

Table 6: Comparison of the Self-evaluation of Social Exclusion Experiences by the Presence of Other Children While Growing Up Using Mann-Whitney U Test

Experiences	An average of experience evaluations in a 5-point Likert scale (range 1-5)		Statistics
	Growing up with siblings	Growing up without siblings	
Bullying at school	2.70	2.82	$p = 0.352$
Verbal sexual harassment at school	1.59	2.00	$p = 0.125$
Physical sexual harassment at school	1.4	2.00	$p = 0.093$
Having been pressured to have sex	1.77	2.09	$p = 0.035$, $r = 0.18$
Having had negative experiences of romantic relationships	2.53	3.00	$p = 0.093$

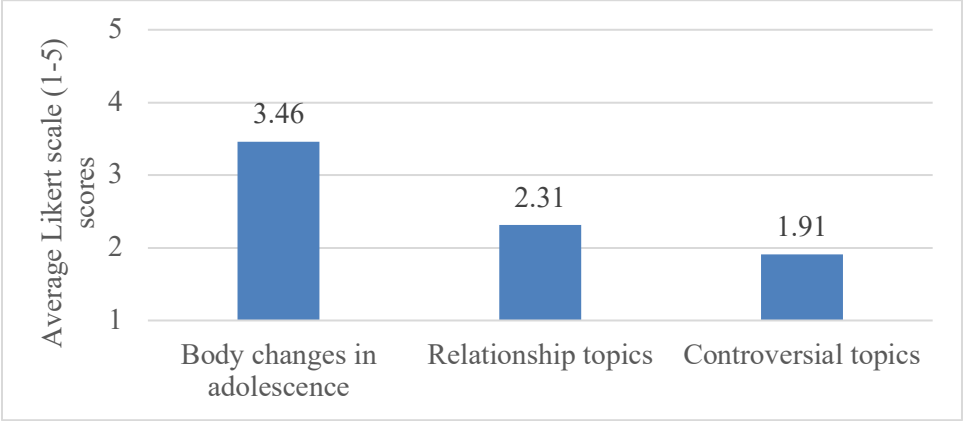
Comparing respondents whose parents are married and cohabiting with those whose parents are divorced, children of the divorced parents admitted the feelings of pressure to have sex ($p = 0.085$) and reported having had more romantic ($p = 0.009$, $r = 0, 24$) and sexual ($p = 0.028$, $r = 0.2$) partners. They also indicated earlier onset of sexual activity ($p = 0.024$, $r = 0.25$), while at the same time experiencing less communication with their partners about sex ($p = 0.313$) and pornography ($p = 0.033$, $r = 0.24$).

> *Sexuality was not discussed in the family. Except through an accusation like "look, don't make babies". But this is not sex education. (3)*

Respondents indicated that their schools did not provide sufficient sexuality education (Figure 2). Statistically significant differences were found in the different topic areas of sexuality education: $p \leq 0.007$, $r \in [0.26; 0.72]$.

> *There was an opportunity to write a question on a piece of paper and I asked if it always hurt the first time. The teacher said, "if the guy loves you, he won't rape you". (1)*

Figure 2: Respondents' Evaluation of the Comprehensiveness of the Delivery of School-based Sexuality Education in the Main Topic Areas



A tendency was observed that in couples who have sex, communication about sexual intercourse is quite frequent (75.8% of the respondents scored 4 and 5), while communication about possible pregnancy is less frequent (57.8%), and about pornography even less frequent (42.7%)). The differences between the answers to these questions are statistically significant according to Wilcoxon Signed-Ranks test: $p \leq 0.007$, $r \in [0.29; 0.59]$.

> *If I raised a question about the relationship, that things weren't okay, that we should try to talk about it, the answer I would get was, "Why are you*

freaking out here?", and instead of having a conversation, he would ignore me. (2)

Of the 128 respondents who answered the question 'When you were first exposed to pornography, did you tell your parents (or other close adults) about it?', only 1 respondent answered positively. This means that the phenomenon of the first exposure to pornography is hidden from parents regardless of the age at which it occurs (this age ranged from 5 to 19 years in the study sample; median age 13). However, 11 (8.0%) of the respondents have never been exposed to pornography in their lives at all. Of these, all 11 were female. The lack of communication with parents was also observed in the reporting of verbal and physical harassment, with respondents almost always rating the statement 'I immediately reported the sexual harassment I experienced to an adult' with lower scores than the statements assessing the harassment (Wilcoxon Signed-Ranks test, $p < 0.001$, $r \in [0.59; 0.71]$).

There was a case at a school disco where a boy didn't understand that I didn't want to be with him, even though it was said verbally. He was very sticky, touching intimate parts, breasts, buttocks. I was very young at the time, and I didn't identify that situation as harassment, because it was said that if a guy likes a girl, that's how he shows attention. I didn't tell anyone then. (2)

Attempts to measure the internalized forms of social exclusion were unsuccessful. The results were chaotic, incongruent. The reason may lie in the quantitative self-evaluating form of the assessment, a problem similar to attitude measurements. In fact, this failure was predicted in an earlier study (Bytautas & Daukilas, 2024).

I felt that they didn't like me. I created the illusion that they didn't want me. (1)

DISCUSSION

Self-evaluation of sexuality-related social exclusion experiences

Various sexuality-related social exclusion experiences are prevalent globally in childhood and adolescence (Amado et al., 2015; Eaton & McGlynn, 2020; Kloess et al., 2014; Owens et al., 2012). Research has shown that this is true even in settings of high socio-economic status (Assink et al., 2019). In our sample, we have identified numerous occurrences of the phenomenon. However, we also observed a high number of respondents evaluating their social exclusion experiences somewhere in between strongly agree and strongly disagree. This suggests that young adults have difficulties evaluating their experiences, that have

an obvious cultural background. It might explain why victims of sexual harassment and abuse tend to avoid reporting the misdeed: our study participants reported having attributed similar experiences to the 'boys will be boys' culture. Such attribution, however, does not eliminate the physical and psychological social exclusion consequences, but rather only prevents reporting the experienced misdeed.

The other reason to evaluating social exclusion experiences with lower scores is often inability to identify them as such. This statement is supported by the common discourse of the interview participants: they did not know then what they know now; in other words, later knowledge in their lives allowed naming their experiences as problematic retrospectively. As Repo-Saeed (2022) observed, the improved understanding of culturally prevalent socially excluding experiences is often the reason why the marginalized people respond to interview invitations in the first place. Our data matches the conclusions of other researchers, that children and adolescents often enter marginalizing situations willingly, because they lack required information (Gubbels et al., 2021; Walsh et al., 2018). Therefore, sexual communication with parents has a crucial role in preventing such occurrences. However, our research participants reported extremely poor parent-child sexual communication experiences. In addition, even when parents recognize the importance of it, they may lack competence to deliver age-appropriate sexuality education, in rare cases even consciously exposing children to sexual content (Smith et al., 2019).

Possible contributions of school-based sexuality education

In the light of the prevailing parent-child sexual miscommunication, school-based sexuality education can be a means of preventing social exclusion experiences because it reaches the majority of children. According to Schneider & Hirsch (2020), comprehensive, undelayed sexuality education that is sensitive to students' existential experiences can help solve most of the problems of sexuality-related social exclusion described in the article. However, as Myat et al. (2024) state, in reality sexuality education is often implemented as a prevention of teenage pregnancies and sexually transmitted infections. We propose that apart from the preventive strategy, the main goal of such education should be recognized as development of students' attitudes that result in a sense of inclusion with the world, as well as social and emotional competences and empathy. It is this type of sexuality education that was the most lacking among the participants in the study.

Social problems related to sexuality are almost always linked to the phenomenon of social exclusion. Although the link is reciprocal (both sexuality-related social problems create social exclusion and vice versa), it is social exclusion that should be given special attention. This is because sexuality-related social exclusion is often overlooked and underestimated. In the International technical guidance on sexuality education, a publication that continues to shape the situation of sexuality education in schools globally, the discourse on social

exclusion is explored only in two curriculum topics (Tolerance, Inclusion and Respect, as well as Understanding, Recognizing and Reducing the Risk of STIs, including HIV) (UNESCO et al., 2018). Instead, we argue that sexuality education in schools provides an opportunity to analyze and address the problematic of social exclusion as an overarching phenomenon that can be recognized in various curriculum topics. This perception could encourage pupils to have a deeper understanding of the phenomenon of sexuality-related social exclusion, including the recognition of social exclusion internalization.

When sexuality education is acknowledged as a scene for critically exploring the issues of social exclusion, it is imperative that these discussions promote empathy and inclusivity rather than perpetuate stereotypes or reinforce discriminatory attitudes (Kesler et al., 2023). Otherwise, sexuality education can have causal effect to problems of internalized social exclusion, which must be avoided. With regard to fostering parent-child sexual communication, sexuality education is an opportunity to encourage parents to avoid discussing sexuality topics based on pre-assumptions. As Journell (2017) explained, in the current state of society development, most of the topics of sexuality are open to debate, i.e. society has not reached a verdict on their interpretation, and it is the presentation of these topics as settled that discourages children and teenagers to seek advice from their parents.

When assessing sexuality-related social exclusion, particular attention should be paid to the manifestations of sexual bullying and sexual harassment at school (Skipper & Fox, 2021). Tolerance of such behavior is incongruent with sexuality education and may have long-term consequences for the normalization and internalization of social exclusion. However, this issue needs to be tackled through preventive character education as postvention is often ineffective.

CONCLUSIONS

Although it is well known that the domain of sexuality has many associated societal and widespread individual problems, there is not enough recognition of the commonalities between them. We suggest a viewpoint that considers social exclusion as an overarching phenomenon of most of the sexuality-related problems. This is because social exclusion ultimately either causes these experiences, is a result of them, or both. Importantly, self-evaluation of sexuality-related social exclusion experiences is problematic due to their attribution to cultural factors and insufficient knowledge. Caught up in a socially excluding situation, a teenager may struggle to grasp the essence of the experience, which results in social exclusion internalization. However, instead of promoting the widely prevalent sexuality education attitude, that students must be taught to react firmly and instantly, reporting the experienced misdeed to a trusted adult, we go on to say that sexuality education should also adopt a social exclusion acknowledgement framework; i.e., to present social exclusion in most of the

sexuality education curriculum topics as coming before and after other problematic sexuality experiences.

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