

**REPRESENTATION OF SEXUAL PLEASURE AND UNPROTECTED SEX AMONG ADOLESCENTS
IN IVORY COAST****YEO Lokotianwa Sali KONE and *DJAKO Logon Albert Thierry**

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Abstract

In Côte d'Ivoire, adolescents are the target of strong awareness raising on the prevention of HIV, STIs and early pregnancies, so much so that their level of knowledge in this area has significantly improved over time. However, many of these young people still have unprotected sex and are also involved in most pregnancies in schools. It is in this context that the present qualitative study attempts to explain the propensity of adolescents to have unprotected sex based on their representation of sexual pleasure. The survey is conducted using a questionnaire on a convenience sample of 160 voluntary participants aged 12 to 18 years old. These are schoolchildren from the first cycle of secondary education from two regions, in this case the District of Abidjan and the Gontougo region. The data collected is processed using descriptive statistics and thematic content analysis. The results indicate that all participants (100%) have already heard of condoms and 89% of them are sexually assets. The majority of respondents (76%) know that condoms can be used both as a contraceptive and a means of protecting yourself against HIV and STIs. But only 26% of sexually active participants admitted to having used a condom during the last sexual encounter. Content analysis reveals that these adolescents view sexual pleasure as emanating primarily from unprotected penetrative sex. This means that the condom, whether male or female, is perceived as a barrier to sexual pleasure, which explains its low use by adolescents. The theory of social representations was used to explain these results. These findings can help improve the effectiveness of HIV and STI prevention awareness techniques.

Keywords: Social representation, Sexual pleasure, Adolescents, Unprotected sex, Ivory Coast.

INTRODUCTION

HIV/AIDS is one of the deadliest diseases of the last four decades (UNAIDS, 2023). In fact, nearly 40.4 million people have died from this disease since the start of the epidemic. However, the pandemic is in decline thanks to concerted global actions to combat it. Thus, since 2010, new HIV contaminations have fallen by 38%, from 2.1 million to 1.3 million in 2022 (UNAIDS (op. cit.)). However, according to UNAIDS (op. cit.), the number of people living with HIV in the world still remains high. For example, around 39 million people including 37.5 million individuals aged 15 and over were living with HIV worldwide in 2022. Sub-Saharan Africa is the region in the world most affected by HIV/AIDS. Nearly 25.6 million people living with this disease reside there. Of these, up to 380,000 people have died from an illness linked to HIV/AIDS in 2022 (UNAIDS, 2023). In this part of the world, the West African sub-region is also affected by this pandemic. The same is true of Côte d'Ivoire whose prevalence of HIV is among the highest in West Africa. Indeed, Côte d'Ivoire is experiencing a generalized HIV epidemic with a prevalence estimated at 2.1% at the end of 2020 (CNLS, 2021). Around 379,593 people were living with HIV in this country in 2020. The same year, there were around 9,428 deaths from the disease. This number of deaths is certainly down compared to previous years; but the number of new HIV infections estimated at 6,184 for the year 2020 still remains high (CNLS, op. cit.). Faced with the threat of HIV/AIDS, Ivorian public health authorities have organized a response. This mainly consists of intensifying awareness, increasing the number of voluntary HIV testing centers as well as the number of care centers for people living with HIV, the establishment of

transmission prevention programs mother-child HIV, subsidize antiretrovirals to increase their accessibility, and reduce the cost of condoms (CNLS, 2021). These prevention actions organized by the Ivorian public authorities to try to contain the HIV epidemic have produced beneficial effects. Thus, the level of knowledge of populations about the disease has significantly improved. Likewise, the prevalence of HIV as well as the number of deaths linked to this pathology have significantly decreased in the Ivorian population. However, in this population, people aged between 15 and 49 continue to engage in risky sexual behaviors. This phenomenon seems more pronounced among young people aged 15 to 24 (CNLS, op. cit.). The notion of "risky sexual behavior" with regard to HIV refers to any practice or conduct that increases the individual probability of contracting HIV or an STI during sexual intercourse. It refers, among other things, to frequenting prostitutes, having several sexual partners, having sex with anal penetration and/or having unprotected sex. . The health impacts and monetary costs of HIV risk behaviors for individuals, their families and society as a whole are considerable and justify public interventions (Yéo, 2021). Furthermore, risky sexual behavior with regard to HIV is directly associated with the increase in early pregnancies, especially in school settings. Moreover, the Ministry of National Education and Literacy (2023) counts 5,600 cases of pregnancies among public secondary education students for the 2020-2021 academic year. This figure is up compared to the previous year during which 5,076 cases of pregnancies were recorded among the same students. However, pregnancies at a young age are risky to the extent that they endanger the life of the mother. Some of these pregnancies sometimes result in clandestine abortions which endanger the lives of young schoolgirls and harm their fertility. In addition, these pregnancies increase the rate of young girls dropping out of school.

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If nothing is done to reverse this propensity of young people aged 15 to 24 to adopt risky sexual practices with regard to HIV, the Ivory Coast risks experiencing a resurgence of the HIV epidemic. To this must be added the increase in the number of early pregnancies linked to unprotected sexual relations which could compromise the future of these young people. One of the ways to reduce these harmful practices would be to act on their determinants. Therefore, what are the explanatory factors of unprotected sexual relations among young people or adolescents?

The scientific literature generally highlights 4 categories of factors influencing the use or not of condoms during sexual intercourse: institutional factors, social factors, relational factors and individual factors (Berhan & Berhan, 2015; Analogbe *et al.*, 2020; Aventin & al., 2021). Institutional factors concern not only the existence or number of public services dedicated to sexual and reproductive health, but also the quality of sex education provided to the population and especially to young people. As an illustration, the lack of sexual and reproductive health services adapted to young people as well as the fact of not offering comprehensive sexual education in schools explain the infrequent use of condoms among young people according to the literature review developed by Aventin & al. (2021). Social factors are related to community functioning. They mainly refer to social norms, community living standards and government policies regarding sexual and reproductive health. In this regard, the review of writings prepared by Aventin & al. (op. cit.) reveals that inequality in male-female relationships, social norms stigmatizing the use of condoms in committed relationships, social norms opposed to adolescent sexuality as well as family planning are directly associated with non-use of condoms during sexual intercourse. Likewise, poverty and the lack of political support for condom use are obstacles to condom use, according to the same study. Relational factors concern the relationship between the individual and his/her sexual partner, his/her peers or other members of his/her social group. For example, unbalanced power dynamics between sexual partners, peer influence against condom use, and inadequate communication between adolescents and their parents or caregivers about sexual and reproductive health reduce the frequency of condom use. condom use among young people (Aventin & al., 2021).

Individual factors are those linked to the adolescent or young person. They are sociodemographic (age, sex, standard of living, level of education), behavioral (propensity to take risks, alcohol consumption), emotional (fear of HIV/AIDS, fear of being rejected by one's partner) and cognitive (perceived legitimacy of adolescent sexuality, perception of condoms). The meta-analysis carried out by Berhan & Berhan (2015) sheds light on the sociodemographic factors associated with risky sexual behavior among young men aged 15 to 24. It reveals that risky sexual relations are characteristic of young men under 20, living in urban areas, with a high level of education and from a wealthy background. The work of Analogbe & al. (2020) carried out in three sub-Saharan African countries, precisely in Kenya, Nigeria and Tanzania, provide information on the sociodemographic, behavioral and relational factors correlated with condom use. They reveal that condom use is more frequent among men, older individuals, respondents infected with HIV and those with an HIV-infected partner. On the other hand, married individuals, those who do not know their partner's HIV status and those who consume

alcohol are less likely to have used a condom during last sexual intercourse. Furthermore, the partner's refusal to use a condom is not only the main factor, but also the most stable factor associated with non-use of a condom at last sexual intercourse among women, people aged 18 to 24 years old and those infected with HIV. Furthermore, in the Middle East and North Africa, the accessibility of condoms, the negative attitude of the sexual partner towards this device, and its perceived ineffectiveness are the main obstacles to condom use according to the review of the work carried out by Hamidi, Regmi & Van Teijlingen (2023).

The institutional, social and relational factors associated with risky sexual behavior with regard to HIV and STIs are those on which public health authorities usually act to try to contain the spread of HIV and mitigate its harmful effects. Actions to combat HIV/AIDS undertaken in this direction have produced appreciable results. The fact that the HIV/AIDS epidemic is generally declining worldwide is proof of this. However, the number of new contaminations in the world, in general, and in Côte d'Ivoire, in particular, remains significant (CNLS, 2021; UNAIDS, 2023). This is a sign of the existence of influential individual factors not taken into account in current strategies to combat HIV/AIDS. Among the individual factors influencing HIV risk behavior, sociodemographic factors (sex, age, standard of living) are generally stable characteristics. Likewise, personality factors or traits are also relatively stable. These two subcategories of determinants are therefore difficult to influence, which limits their interest in disease prevention. The usefulness of these factors for prevention lies in the fact that they reveal the individuals most likely to adopt risky sexual behavior. The latter are precisely those towards whom it is wise to raise awareness. Additionally, emotional or affective factors are difficult to control, limiting their practical usefulness in awareness-raising.

Cognitive factors are therefore the only ones to be both influential and relatively easy to control compared to other factors. One of these factors seems to us to play an important role in condom use among young people. It is about the representation of sexual pleasure. Indeed, the quest for pleasure is the main motivation for young people to maintain sexual relations. However, according to the theory of social representations, individuals do not react to objective situations or objects, but rather react to the social representation they have of them. According to Abric (1994), "Social representation is the product and process of a mental activity by which an individual or a group reconstructs the reality with which it is confronted and attributes to it a specific meaning". Social representations are systems of interpretation governing our relationship to the world which orient and organize our behavior. Thus, the behavior that a young person could adopt to access this sexual pleasure would be dictated by their representation of sexual pleasure. Clearly, the use or not of condoms during sexual intercourse among adolescents could be determined by the secular knowledge which fuels their representation of sexual pleasure. Identifying the constituent elements of this social representation could prove useful for the development of more effective preventive strategies. The interest of such an analytical perspective is reinforced by the fact that the persistence of unprotected sexual relations among young people continues to frustrate current awareness strategies implemented by public health authorities. The present study therefore aims to explain the propensity of adolescents (from the Abidjan District and the Gontougo

region) to have unprotected sexual relations based on their representation of sexual pleasure. Achieving this objective requires an adapted methodology which is presented in the following lines.

METHODOLOGY

The methodology implemented in this work can be summarized in three successive operations: the presentation of the participants, the description of the data collection instrument and the exploitation of this data.

Participants

All public secondary education students form the study population. The ages of these schoolchildren generally vary from 10 to 19 years old. From this population we extract a convenience sample of 160 participants aged 12 to 18 years old. Two essential reasons explain this choice. On the one hand, according to the results of the EDS survey (2022), among young people aged 15 to 24, adolescents aged between 15 and 19 are those who most frequently engage in unprotected sexual intercourse. On the other hand, students in public establishments in 4th, 3rd and 2nd grades (whose age ranges between 12 and 18 years) are the most affected by pregnancies in schools. The survey is carried out among 160 students (80 girls and 80 boys) aged between 12 and 18 years old attending public general secondary education establishments. These are voluntary participants whose average age is approximately 14 and a half years ($m = 14.47$ years), with a standard deviation of 1.98. Half of the participants come from the Autonomous District of Abidjan, while the other half come from the Gontougo region. The choice of these two regions is explained by the fact that they are the most affected by pregnancies in schools according to the Ivorian Ministry of National Education and Literacy (2023). Each of the participants gave their free and informed consent to participate in the study, after having been informed of the objective of the study and assured of the anonymity and confidentiality of their responses.

Data collection instrument

The data collection instrument is a questionnaire designed for the purposes of the study. It is organized into three parts: biographical data, the evocation questionnaire and a final part dedicated to assessing risky sexual behavior among participants. Biographical data are sociodemographic characteristics influencing HIV risk behaviors according to the scientific literature. These are the gender, age, level of education and standard of living of the participants (Analogbe & *al.*, 2020). The evocation questionnaire is similar to that developed by Abric (1994) to apply the hierarchical evocation technique. It consists of starting from an inducing word and asking the participant to cite the words (nouns, expressions, adjectives, verbs, etc.) that spontaneously come to mind, then to arrange them in descending order of importance. In this work, the inducing term is the expression: "sexual pleasure". The participant is first invited to name five words that immediately come to mind when they hear the expression "sexual pleasure"; then, secondly, to order these words from most important to least important. The last axis of the instrument assesses the participant's sexual behavior. This involves determining whether the participant is sexually active, used a condom during the last sexual encounter and also identifying the reasons they give to justify their use or not of a condom.

Data processing

The data was used using two techniques: descriptive statistics and thematic content analysis. The first technique (descriptive statistics) is used to determine the percentage of sexually active participants as well as that of respondents who used a condom during the last sexual intercourse. The second technique, thematic content analysis, is used to process participants' responses to the evocation questionnaire following the 6 successive steps described by Aktouf (1987): (1) reading the corpus to be analyzed, (2) the definition of themes or categories, (3) the definition of the unit of information or context, (4) the definition of the unit of coding or recording, (5) the definition of the unit numeration, (6) quantification. Reading the words mentioned by the participants using the inducing term "sexual pleasure" made it possible to identify 2 themes around which the representation of sexual pleasure among the respondents is organized. This is about the definition of sexual pleasure and the sources of this pleasure. In the remainder of the text, these two themes will be called dimensions of the representation of sexual pleasure and the subthemes that compose them will be called components. The dimension dealing with the definition of sexual pleasure is organized into 3 components, in this case "the enjoyment of sexual partners", "the carnal feeling" and "excitement". Likewise, the dimension relating to the sources of sexual pleasure also admits 3 components, notably "unprotected sexual relations", "sexual practices" and "the foreplay of the sexual act".

The unit of information corresponds to the broader context to which one must refer to grasp the meaning of a word (or group of words) cited by a participant in order to know to which of the two dimensions of the representation of sexual pleasure this belongs. We use here as a unit of information the series of five words cited by a participant based on the inducing term "sexual pleasure". The recording unit makes it possible to break down the corpus analyzed (all the words cited by the participants) into its elementary constituents. Here we choose as the recording unit the word (or group of words) cited by a participant in association with the inducing term "sexual pleasure". Each word evoked is considered as a unitary part of the analyzed corpus. It is therefore detached from other words to be coded. The number unit is used to explain the method of calculating the frequency or percentage corresponding to each word, component or dimension of the representation of sexual pleasure. The frequency of a word (or group of words) corresponds to the number of times that this word is repeated in all the words cited by the participants in association with the inducing term "sexual pleasure". The frequency of a dimension or component of the representation of sexual pleasure is obtained by adding that of the words that compose it. Quantization consists of determining these frequencies in a practical way. The implementation of thematic content analysis as described above leads to lessons which are presented in the following lines.

RESULTS

Knowledge and use of condoms among participants

The application of descriptive statistics to the data collected indicates that all of the participants (100%) have already heard of condoms. The majority of them (76%), that is to say almost 3 out of 4 adolescents, know that the condom can be used both

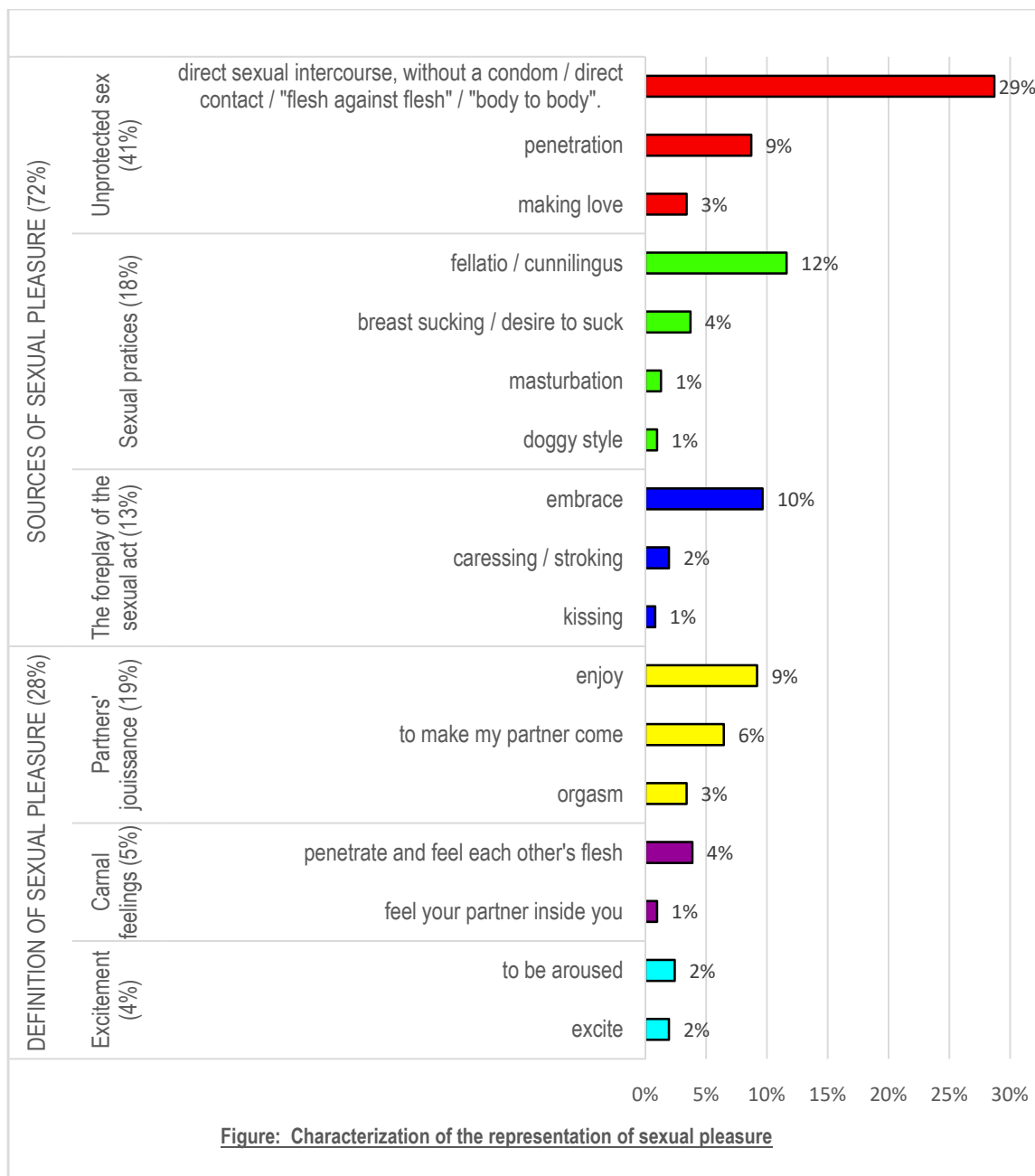
as a contraceptive and a means of protection against HIV and STIs. Furthermore, around 9 out of 10 participants (89%) are sexually active. But, up to 74% of them admit to not having used a condom during the last sexual encounter. These statistics indicate that the participants are relatively well informed about condoms, since they have all heard about them and know the contraceptive and preventive role of this device. However, this does not stop them from having unprotected sex. This apparent paradox could find its explanation in the representation of sexual pleasure among these adolescents.

Representation of sexual pleasure among adolescents

The graph below summarizes the characteristics of the representation of sexual pleasure.

The graph above shows that the social representation of sexual pleasure is organized into two essential dimensions: the sources of sexual pleasure and the definition of this pleasure.

The dimension relating to the sources of sexual pleasure is the most salient. The elements that compose it represent 72% of the words or groups of words mentioned. This dimension essentially encompasses three sources of sexual pleasure. This concerns firstly unprotected sexual intercourse with penetration (41%), then sexual practices (18%) and finally the foreplay of the sexual act (13%). In the imagination of the participants, sexual pleasure comes mainly from unprotected sexual intercourse with penetration, then from sexual practices (18%) and finally from the foreplay of the sexual act (13%). Sexual practices perceived as providing the most pleasure are characterized by sucking the erogenous zones of the sexual partner, in particular the genitals (fellatio/cunnilingus: 12%), the breast (4%). Then comes masturbation (1%) consisting of giving oneself pleasure and finally a sexual posture such as doggy style (1%) is perceived as increasing sexual pleasure. In the conception of the respondents, the foreplay of the sexual act consists of sexual partners using their bodies to exchange acts of gentleness and tenderness. To do this, sexual partners hug (11%), caress (2%) and kiss (1%).



In the imagination of the participants, there can be no sexual pleasure outside of unprotected intercourse. The expressions "direct relationships", "flesh against flesh" show this well. If the use of condoms is experienced as a barrier to sexual pleasure, individuals will tend not to use them even if it puts them at other risks (illness, unwanted pregnancies, etc.). The participants seem to have the impression that any sex with a condom, whether male or female, hinders their pleasure and therefore their enjoyment. This result is confirmed by the fact that enjoyment 19% and unprotected sexual relations 29% (flesh against flesh) have a greater proportion. Thus, we can maintain that risk-taking in sexual relations among young people could be explained by the fact that they engage in sexual relations to obtain pleasure and that their representation of sexual pleasure is incompatible with wearing a condom. This belief relating to the incompatibility of sexual pleasure and condoms could also explain the increasingly high rate of cases of pregnancy in schools. Indeed, if the individual thinks that the condom constitutes an obstacle to his sexual pleasure, he may tend not to use it during sexual intercourse and therefore take more risks. These results clearly show that young people's representation of sexual pleasure constitutes a barrier to condom use. Concretely, this means that the way young people imagine the pleasure they feel during sexual intercourse influences whether or not they use a condom. Words related to the definition of sexual pleasure form the second dimension of the representation of sexual pleasure. They are the least frequent words cited by respondents in connection with sexual pleasure and represent 27% of these words. This dimension of the representation of sexual pleasure includes three components, in this case the enjoyment of partners (19%), the carnal feeling (5%) and the excitement of sexual partners (4%). This means that sexual pleasure is conceived as being the enjoyment of sexual partners resulting from their carnal feelings and their excitement during the sexual act.

Social representations make it possible to construct reality and guide us in how to name and define together the different aspects of our everyday reality; in the way of interpreting them, ruling on them and, where appropriate, taking a position regarding them and defending it according to Jodelet (1989). It fulfills several functions among which we have:

- The orientation function of behavior: it guides behavior and practices;
- The function of justification: they allow, a posteriori, to justify positions taken and attitudes. This means that the sexual practices of adolescents are strongly influenced by their representations of sexual pleasure. If we look at the different sources of sexual pleasure according to them, it clearly appears that excitement comes through "body to body" relationships, "direct, bareback relationships" constitute a sufficient reason not to protect oneself.

In short, the fact that adolescents consider the condom as a physical barrier between them and their sexual partner, an obstacle to sexual pleasure, pushes them to have unprotected sex. This explains their vulnerability to sexually transmitted infections and also to early pregnancies for schoolgirls.

DISCUSSION

The present qualitative study shows that sexual pleasure is defined by adolescents aged 12 to 18 as enjoyment resulting

from the arousal of partners during the essentially unprotected sexual act. This pleasure is also perceived as emanating from certain sexual practices adopted by partners (fellatio/cunnilingus, breast sucking, doggy style, masturbation) as well as from the foreplay of the sexual act (embracing, caresses, kissing). Sexual pleasure as represented by the participants is incompatible with using a condom during sexual intercourse. Clearly, in the popular imagination of the participants, pleasure is only obtained through unprotected sexual relations. We then understand why these young people are so resistant to using condoms. They tend to behave this way because the search for pleasure is their main motivation for having sex. And, since their conception of sexual pleasure excludes the use of condoms, it is logical that these young people are reluctant to use them.

These conclusions are supported by the work of other authors such as Pérez & Aimer (2017), Torres, Beceni & Cantera (2021). Indeed, in Mexico, Pérez & Aimer (2017) show that residents of Mexico City aged 25 to 35 define sexual pleasure as being the perception of enjoyment, of satisfaction resulting from the activation of physiological responses such as as desire, arousal and orgasm caused by direct stimulation of the genitals primarily through sexual intercourse, caressing, kissing or masturbation. Along the same lines, Torres, Beceni & Cantera (2021) study the perception of sexual desire among 252 students at the Intercultural University of the State of Puebla in Mexico. They show that the participants conceive sexuality as being a set of activities and behaviors providing pleasure to sexual partners or members of the marital couple. This pleasure is perceived as coming from the intimacy between sexual partners, that is to say from the fact that they give themselves to each other through caresses, hugs, kisses, but also through through sexual penetration. Sexual pleasure is seen here as an impulse, an excitement whose outcome is sexual satisfaction. Furthermore, the present research also reveals that the representation of sexual pleasure among young people pushes them to have unprotected sex. This fact is also attested by authors such as Kanda & Mash (2018) and Mbachu & al. (2021). Indeed, Kanda & Mash (2018) observe that young adults in Botswana recognize the importance of condoms to prevent STIs and unwanted pregnancies. But, they mention the fact that the condom reduces sexual pleasure is an important reason which explains its non-use. Mbachu & al. (2021) reach the same conclusion in Nigeria by surveying adolescents aged 13 to 18. The latter are also convinced of the usefulness of condoms in preventing pregnancies and STIs. However, some of these adolescents, especially boys, consider that condoms reduce sexual pleasure, which pushes them to have unprotected sex. They believe that the condom hinders the pleasure of direct "flesh-to-flesh" contact during sexual intercourse. On the other hand, other adolescents defend the opposite point of view; They judge that using a condom during sexual intercourse increases sexual pleasure, in the sense that it gives them the assurance of being protected against STIs and avoiding unwanted pregnancies.

However, Edwards (2010) and Apostolidis (2006) point out that it is not only the individual's representation of sexual pleasure that conditions their use of condoms. Condom use, according to these authors, is also influenced by the sexual partner's attitude towards the condom as well as by the feelings that the partners have for each other. Edwards (2010) shows, to this end, that young people aged 18 to 25 are less likely to use condoms if their sexual partner is opposed to the use of this

device. Apostolidis (2006) studies, for his part, the representation of a sexual relationship among young French and Greek adults aged between 18 and 26. It highlights two factors structuring this social representation (sentimental valence and hedonism), the first of which is closely correlated with the perception of the risk of HIV contamination. Thus, subjects feel less at risk of contracting HIV when they have the impression of being involved in a romantic relationship. In this case, they do not feel the need to use condoms to protect themselves against HIV in such a relationship. On the other hand, they are inclined to perceive themselves at risk of contracting HIV when they feel little connection to their sexual partner. In this second case, they are more likely to use condoms to protect themselves from HIV.

Conclusion

This qualitative study shows that in the social representations of adolescents in Côte d'Ivoire (particularly in the District of Abidjan and the Gontougo region), sexual pleasure is an enjoyment resulting mainly from unprotected sexual relations with penetration. Such a conception of sexual pleasure may explain the reluctance of these adolescents to use condoms given that the search for pleasure is their main motivation for having sexual relations. This result could contribute to improving awareness campaigns on the prevention of HIV, STIs and unwanted pregnancies among adolescents. He suggests that these campaigns should take into account the fact that the search for pleasure is, not only, one of the main motivations of adolescents to have sexual relations, but above all that the representation of sexual pleasure among them is incompatible with the condom seen as a barrier to pleasure. It therefore appears wise in raising awareness to certainly emphasize the safety of sexual relations, but also and above all to take into consideration the hedonic dimension of the sexual act. The image of the condom should therefore be taken care of so as to make it compatible with adolescents' intention to obtain pleasure through sexual intercourse. This is all the more relevant as the meta-analysis carried out by Zaneva, Philpott, Singh, Larsson & Gonsalves (2022) proves that taking sexual pleasure into account in awareness-raising interventions increases individual condom use and improves sexual health outcomes.

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