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Orginal Article

# Qualitative Study of the Sexual Problems of Adolescents Living in Welfare Boarding Centers

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## Abstract

Adolescents are among the most vulnerable age groups, facing a variety of sexual issues that can be exacerbated by the rapid physical, emotional, and cognitive changes characteristic of this developmental stage. These challenges can have lasting effects on their mental health, sexual identity formation, and future relationships. This vulnerability is heightened in settings such as residential welfare boarding centers, where emotional support and educational resources may be lacking, making adolescents more susceptible to harmful and dysfunctional sexual experiences. The present study aimed to qualitatively investigate the sexual problems experienced by adolescents living in welfare boarding centers, utilizing a qualitative phenomenological approach. A total of 15 adolescents were selected through purposive sampling. Data were collected through semi-structured interviews, which continued until data saturation was achieved. The analysis was based on Colaizzi's method. To ensure the accuracy and reliability of the information obtained, three methods—credibility, dependability, and confirmability—were employed. This analytical approach allowed for an accurate representation of the adolescents' lived experiences and provided a comprehensive understanding of their sexual problems, examining emotional, behavioral, and cognitive dimensions. Data analysis revealed twenty-seven initial concepts, nine sub-themes, and three main themes: Sexual Traumas (including sexual harassment by society, harassment from others and family, and the painful recollection of sexual abuse). Sexual Misbehavior (including poor sexual hygiene, addiction to masturbation, and harassment from others and family). Invalid Sexual Modeling (including learning about sex through pornography, sexual awareness and persuasion by peers, and inappropriate sexual patterns). The findings of this

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research indicate that adolescents in welfare boarding centers face numerous sexual problems that require recognition and intervention. Addressing these issues could facilitate the development of preventive programs aimed at reducing sexual harm. It is recommended that professionals and supervisors in these centers utilize the findings to enhance the sexual health of adolescents. Additionally, it is essential to develop and implement comprehensive, clear, specific, and practical educational intervention programs.

**Keywords**: Sexual problems, day-care centers, adolescents

## Extended Abstract

### Introduction

Adolescence is one of the most sensitive stages of life. Adolescents separated from home and family are not only more vulnerable to sexual harm than others due to separation and experiencing stressful events, but they also miss out on educational opportunities through appropriate resources. They are more likely to experience unhealthy relationships with parents and others. In addition, these adolescents are more exposed to trauma and other risk factors that increase the likelihood of unsafe sexual practices. Such behaviors may include initiating sex at a young age, having multiple sexual partners, and not using adequate contraception. Given these challenges, it is essential for all adolescents, especially those who are unaccompanied or abused, to become familiar with sexual issues and learn how to deal with them effectively. Therefore, it is essential to examine the sexual concerns, problems, and challenges of adolescents in residential centers. Based on this research, appropriate educational and intervention programs should be developed and implemented. Accordingly, the present study aimed to qualitatively investigate the sexual problems of adolescents living in welfare boarding centers

### Methods

The present study explored the sexual issues faced by adolescents living in residential care centers using a qualitative phenomenological approach. The participants consisted of 15 adolescents who were selected through purposive sampling. The inclusion criteria required participants to be aged between 15 and 18 years, have a history of residing in welfare residential

care centers for at least six months, and voluntarily consent to participate in the study. The exclusion criteria included missing more than two intervention sessions, unwillingness to continue participation, and failure to complete assigned homework.Data were collected through semi-structured interviews, which continued until data saturation was achieved. Each interview lasted between 45 to 60 minutes. The collected data were organized into primary themes, sub-themes, and main themes. In the initial stage, primary themes were identified by labeling the themes and statements from the first interview. Sub-themes were then categorized after labeling several interviews, at which point most of the categories were established. To ensure validity, participants had the opportunity to review and validate the data from each interview. After each session, notes and recorded statements were quickly reviewed. Additionally, codes and main themes were discussed in several sessions with experts, and both participants and specialists in the field confirmed the validity of the findings

## Results

The data were coded and analyzed in three stages. The results revealed 27 primary concepts, 9 subthemes, and 3 main themes including sexual harm (sexual abuse by society, sexual abuse by others and family, recalling painful memories of sexual abuse), sexual misconduct (poor sexual health, masturbation addiction, sexual abuse by others and family), and invalid sexual role modeling (introduction to sex through pornography, sexual awareness and encouragement by peers, inappropriate sexual role modeling).

## Discussion

Findings showed that adolescents who experience sexual problems often experience sexual trauma, engage in inappropriate sexual behaviors, and encounter inappropriate sexual role models. In particular, sexual trauma among adolescents in residential care often results from abuse by family members or other community members, leading to lasting emotional distress and difficulties in forming healthy relationships. Inappropriate sexual behaviors in adolescents can include poor sexual hygiene, masturbation addiction, and participation in risky sexual activities. These behaviors may result from lack of education, emotional neglect, or exposure to inappropriate sources. In addition, inappropriate sexual role models occur when adolescents learn about sexual issues from

inappropriate sources, such as pornography or peer influence. This can lead to distorted beliefs, unrealistic expectations, and unhealthy sexual behaviors. To enhance adolescent sexual health, it is essential to develop and implement clear, specific, and practical educational intervention programs.

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