

» Youth Sexuality 9th Iteration

In Focus: Contraceptive Behaviour

The Federal Centre for Health Education's (BZgA) representative study Youth Sexuality 9th Iteration is a representative repeat survey. A large-scale survey of young people, their parents and young adults was launched for the ninth time in the summer of 2019. It follows on from predecessor studies conducted between 1980 and 2014. The goal of the study is to acquire reliable data about the attitudes and behaviours of young people in the Federal Republic of Germany with regards to sexuality and contraception.

Currently, 28 percent of the adolescents aged 14 to 17 and 82 percent of the young adults aged 18 to 25 say they have had sexual intercourse at least once. For most of the sexually active young people it is happily the case that contraception is the obvious choice from the very first time. This fact sheet presents an overview of the contraceptive behaviour of young people aged 14 to 25. It takes a closer look at their experiences with various contraceptives and the reasons for not using contraception. Contraception serves the avoidance of unwanted pregnancies, which is why this fact sheet focuses on opposite-sex sexual contacts. Whenever this fact sheet mentions sexual intercourse, it is referring to heterosexual intercourse.

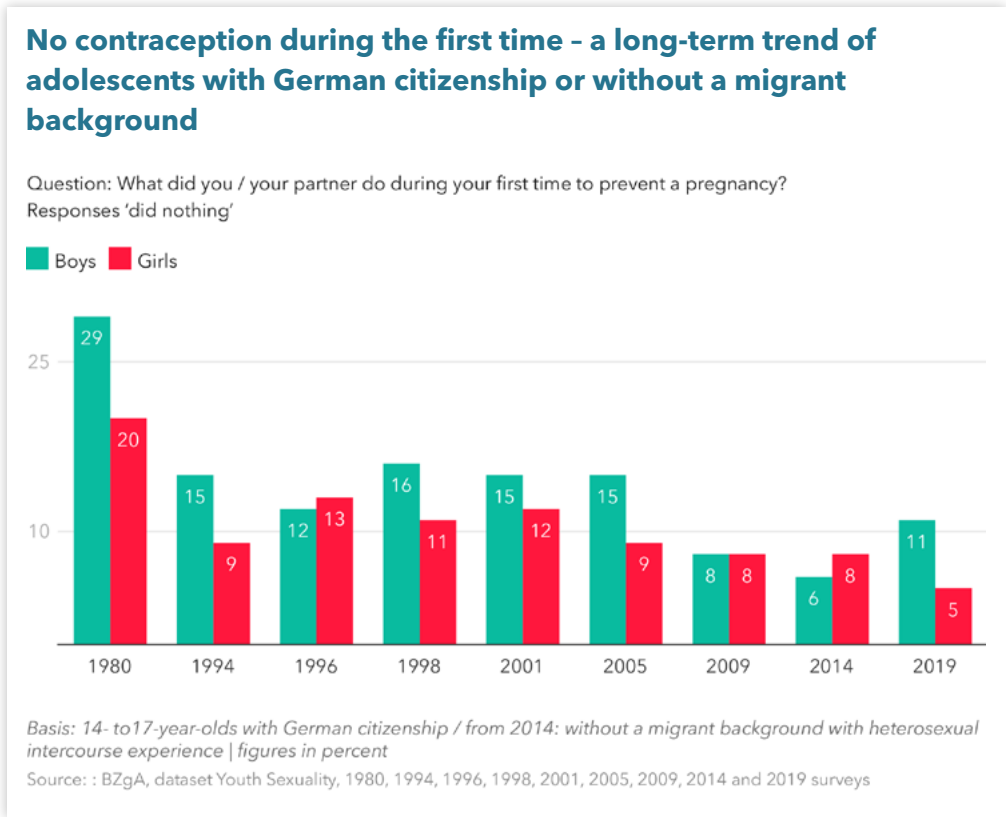
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More young people are using reliable contraception for their first time – a positive long-term trend.

The first time, the first heterosexual intercourse, occurred without contraception for 9 percent of the 14- to 17-year-olds, the data from the current, ninth trend investigation into Youth Sexuality show. Looking at the trend development for those who did not use contraception for their first time, we can see that this figure has been higher in the past. The data for adolescents aged between 14 and 17 with German citizenship/without a migrant background now go back more than four decades (see Figure 1).

- Among the girls in particular the percentage not using contraception during their first sexual intercourse has lastingly fallen. In 1980 the figure was 20 percent, four times higher than today. At 5 percent the girls have currently achieved a new historical low.
- When looking at the boys between 14 and 17 there is also a clear declining trend over time. However, at 11 percent more boys are saying again that they did not use any kind of contraceptive measure during their first sexual intercourse.

Figure 1



For young people with a migrant background the trend observations go back to 2005. In this group the contraceptive behaviour has substantially improved over time, too. Today 10 percent of the girls and 10 percent of the boys with a migrant background said they had 'done nothing' about contraception during their first time.

Situational and socio-cultural factors play an important role when it comes to first time using contraceptives.

The fewest adolescents and young adults were younger than 17 when they had sexual intercourse for the first time. Among the 16-year-olds surveyed only one in three (34 %) said they had already had sexual intercourse. However sexual activity increased significantly with age.

The risk of using unreliable contraception during the first time is greatest when the adolescents are very young when they have their first time. The age of 14 seems to be a turning point (see Table 1):

- If the first time took place at age 14 or younger, contraception was not used in 19 percent of cases.
- But this figure drops rapidly at the age 15 already - especially for the female respondents - and the percentage remains low even if the first time took place later.

Result 2

[See Youth Sexuality 9th Iteration - Fact Sheet 'In Focus: Becoming Sexually Active'](#)



No contraception during the first time (by age at which the respondents became sexually active)

Responses for 'no contraception, did nothing' for the first time sexual intercourse

	Up to 14 years old	15 years old	16 years old	17 years old	18 years old or older
14- to 25-year-olds overall	19	8	7	7	5
Female	18	4	5	7	6
Male	20	12	9	7	5

Basis: 14- to 25-year-olds | figures in percent
Source: BZgA, dataset Youth Sexuality, 2019 survey

Table 1

A further risk factor for not using contraception during the first time is when the adolescents and young adults did not know or only casually knew the person with whom they experienced their first time. If this was the case, 19 percent said they did not use contraception. If the partners were well known or if they were in a steady relationship, then the percentage is much lower (10 % and 5 % respectively).

The contraceptive behaviour is also influenced by the socio-cultural circumstances of the adolescents and young adults.

- Educational level plays a role for example: not using contraception during the first time is disproportionately widespread among those respondents with a basic level of education (Hauptschule, Förderschule, Sonderschule) (17 % compared to 9 % among a moderate level of education and 5 % among a higher level). The influence of education can be seen for both the female and male respondents (basic education: 18 % and 17 %).
- What also stands out is that if there are close ties to a religious denomination at the time someone becomes sexually active, then it is also less likely that they will have used contraception. Among the adolescents who said they had close religious ties, 14 percent took no precautions during their first time. Among those with less close ties or even negative / indifferent attitudes to religion, the maximum figure is 9 percent.

[See Youth Sexuality 9th Iteration - Fact Sheet 'Sexuality Education and Contraceptive Advice at Home'](#)



Deficits with regards to the level of sexuality education received (sexuality education at school, contraceptive advice in the home) as well as an absence of confidants for sex-related questions also increase the risk of using insufficient contraception during the first time.

Result 3

The most common reason cited for not using contraception for the first time is the surprise factor.

When the adolescents and young adults are asked why they did not use contraception during their first time, the vast majority say they were taken by surprise - Figure 2 separates the most common reasons given, broken down by the answers from the female and male respondents.

Figure 2



Among the girls and young women, half said the event occurred 'too spontaneously so that we didn't think about anything anymore' (53%); among the male respondents this option was picked by a full two in three cases (66%).

The second-most common reason - also cited to a greater extent by the male respondents - for not using contraception during the first time is the risky one of thinking 'nothing would happen' (36%). The adolescents under the age of 18 are more likely to say that contraceptives were not available during their first time or that they had vowed to 'be careful'.

A lack of information ('I didn't really know enough') is only rarely cited as a reason (5%).

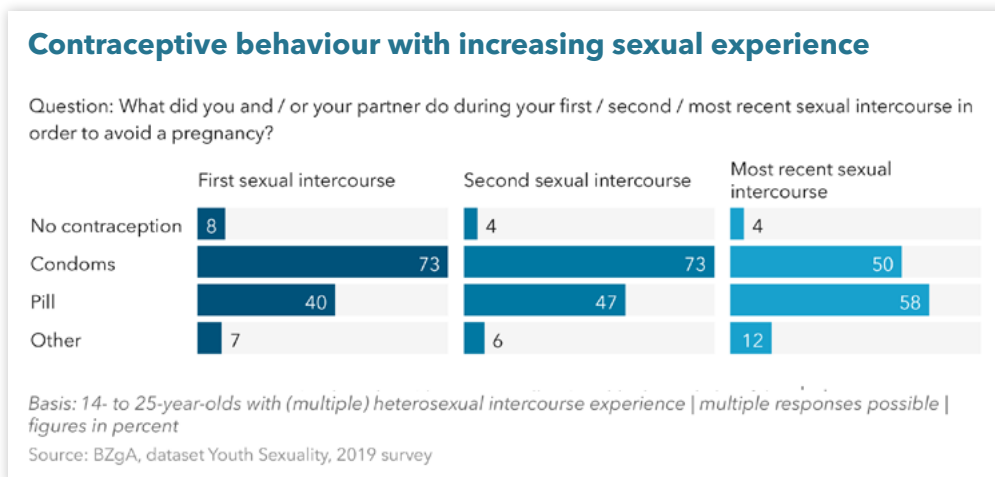
Result 4

Condoms are the contraceptive of choice for the first time – and as experience increases, there is often a switch to the pill.

With increasing sexual experience young people alter their contraceptive behaviour. Looking not just at the contraceptive behaviour of the 14- to 17-year-olds but at the responses of all sexually active adolescents and young adults between the ages of 14 and 25, then we can see that condoms are the most common form of contraception at the start of a person’s sexually active life. The contraceptive pill is not the dominant contraceptive for the first time or even the second time.

Over the course of a person’s sexual life condoms decrease in significance and are largely replaced by the contraceptive pill: looking at the respondents’ most recent sexual intercourse, the majority of the adolescents and young adults who have had sexual intercourse more than once, say they used the contraceptive pill (58%). Figure 3 is an overview of the current contraceptive behaviour of adolescents and young adults at three crucial points in time.

Figure 3



This development trends the same for both sexes but boys and young men prefer using condoms for longer than their female peers. Even during the most recent sexual intercourse 57 percent said they had used condoms (girls/young women: 42 %). The pill was the most commonly used contraceptive during the most recent intercourse for both sexes (male: 55 %; female: 61 %).

The combination strategy - using the contraceptive pill together with condoms - achieves its peak among these three data points at the second intercourse (27 %). After this the exclusive use of the contraceptive pill increases up to the level of the most recent intercourse (pill only: 37 %). At this point 27 percent of the female respondents and 32 percent of the boys and young men rely on condoms alone as a form of birth control.

Overall, almost all sexually active adolescents and young adults between the ages of 14 and 25 have used condoms: nine in ten adolescents and young adults who have already had sexual intercourse report that they have used a condom before (93 %). Alongside the contraceptive pill (80 %) condoms are therefore the contraceptive that is the most widespread among the 14- to 25-year-olds.

Alternative methods of birth control already play a very subordinate role during this phase of young people's sex lives. Looking at their most recent sexual intercourse, one in ten of the sexually active respondents said they had used other methods than the contraceptive pill or condoms (12 %). In this context they cite

- the (copper) coil (4 %)
- alternative hormonal contraceptives such as patches or injections (3 %)
- Unsafe methods such as pulling out or 'natural family planning' (all 2 %)

[See Youth Sexuality
9th Iteration - Fact Sheet
'In Focus: Condoms'](#)



There has been a marked decline in the use of the contraceptive pill in recent years.

The long-term trend data on Youth Sexuality reveal that (at least for the young people with German citizenship, from 2009 without a migrant background, between the ages of 14 and 17):

- The contraceptive pill as the first contraceptive achieved a continually higher reach.
- From the new millennium there was an increase in a 'double strategy' of using condoms together with the contraceptive pill.

This latter approach, in addition to providing additional protection against pregnancy, also has advantages in terms of preventing HIV/AIDS and other sexually transmitted infections (STIs).

However, this trend has currently been broken:

- The overall use of the contraceptive pill has fallen between 2014 and 2019.
- The combined use of the contraceptive pill and condoms is increasingly making way to exclusively using condoms for the first sexual intercourse.

The most significant decline took place among the sexually active girls between the ages of 14 and 17, as Figure 4 illustrates.

This new development is also confirmed by the comparison with the responses given by the 18- to 25-year-old young women whose first sexual intercourse experience tends to lie further back: even among the older respondents the use of the contraceptive pill as the first contraceptive has been on the decline in recent years, but with a minus of 6 percentage points compared to 2014 it is less pronounced than among the 14- to 17-year-old girls (14 points).

The contraceptive pill is still considered

- particularly effective
- easily available
- easy to manage

Today it is more likely to be seen as inexpensive than five years ago (since 2019 the contraceptive pill is available to young women for free up until their 22nd birthday).

The data actually seem to indicate that the observable decline in the usage of the contraceptive pill is based on a more critical attitude towards how it impacts the body. A third of the sexually active girls under the age of 18 said they were worried about physical and emotional problems because of the pill or other contraceptive methods (33%). Among the young women between the ages of 18 and 25 almost half assume such negative side effects (46%).

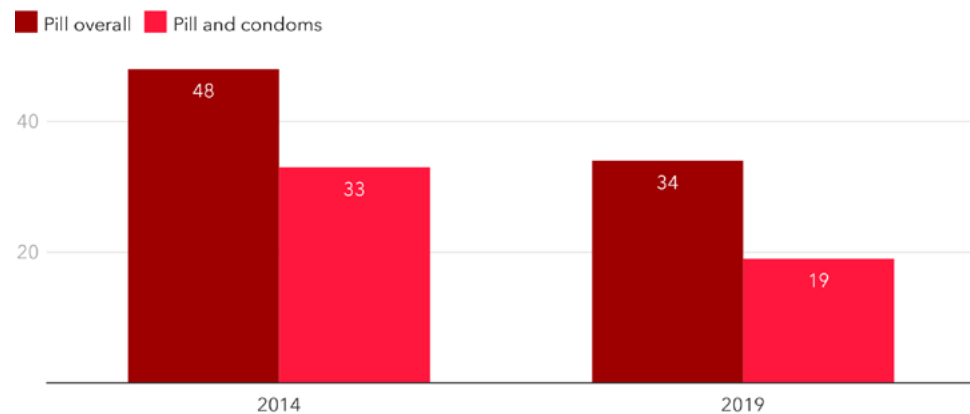
[See Youth Sexuality 9th Iteration - Fact Sheet 'In Focus: The Contraceptive Pill'](#)



Figure 4

Combined use of the contraceptive pill / condoms as well as the contraceptive pill overall in a 5-year trend (girls)

Question: What did you and/or your partner do during your first sexual intercourse in order to avoid a pregnancy?
Here: contraceptive pill, and combined use of the contraceptive pill / condoms



Basis: 14- to 17-year-old girls with heterosexual intercourse experience | multiple responses possible | figures in percent

Source: BZgA, dataset Youth Sexuality, 2014 and 2019 surveys

Almost everyone has heard of emergency contraception by means of the 'morning-after pill'.

What if no contraception was used even when the respondents did not want children? If there was a problem with the contraceptive, or contraception was not used, the 'morning-after pill' is available as emergency contraception. In March 2015 the prescription requirement for emergency contraception was abolished in Germany. Since then the 'morning after pill' has been available from pharmacies without a prescription.

Almost all 14- to 25-year-old girls and young women are aware of the option of emergency contraception via the 'morning-after pill': 96 percent of those who are sexually active know about it and the differences when looking at the cultural backgrounds of the girls and young women with sexual intercourse experience are marginal.

27 percent of the sexually active girls and young women have already used the 'morning-after pill' as emergency contraception, including 9 percent who have used it more than once. But there is no room for the conclusion that the 'morning-after pill' is taken in a cavalier manner. The need to take the 'morning-after pill' generally arises from something having gone wrong with the actual contraceptive used (see Figure 5).

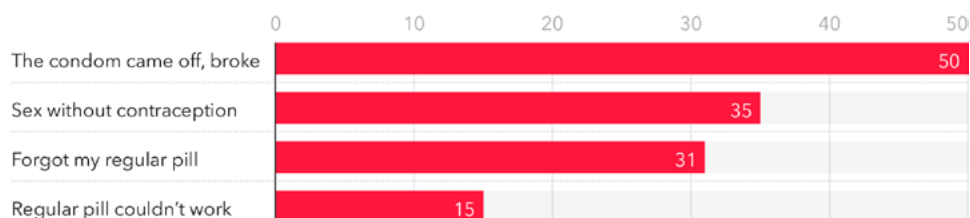
Result 6

[See Youth Sexuality 9th Iteration – Fact Sheet 'Emergency Contraception'](#)



Reasons for using the 'morning-after pill'

Question: Have you ever taken the 'morning-after pill' yourself? If yes, what happened that you used this method?



Basis: 14- to 25-year-old girls and young women with multiple (heterosexual) intercourse experience who have already used the 'morning-after pill' | multiple responses possible | figures in percent

Source: BZgA, dataset Youth Sexuality, 2019 survey

Figure 5

Result 7

The responsibility for contraception changes over the course of a person's sexual life.

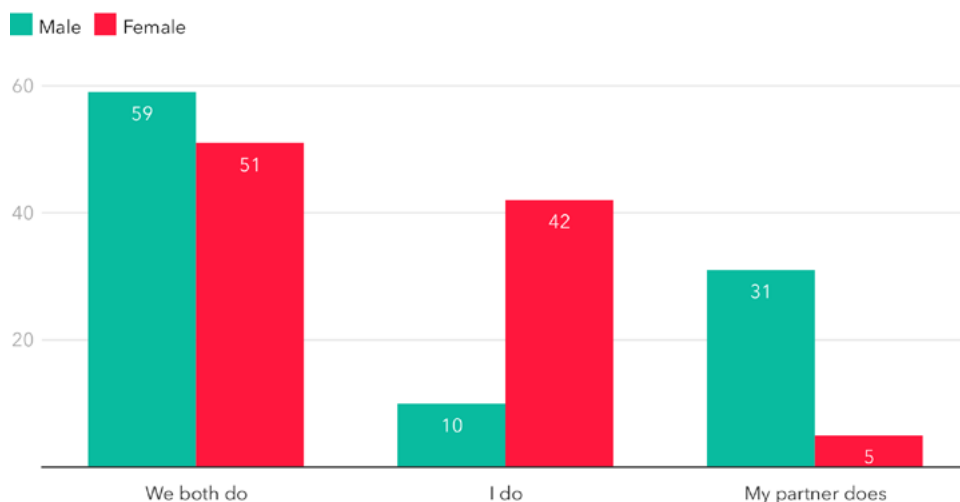
Among the young people between 14 and 17 a desire to have a child can generally be ruled out (a mere 1 % of the adolescents in the current survey would consider a pregnancy now 'positive').

- Among sexually active girls at this age, 77 percent say they 'always pay very close attention' to avoiding the possibility of a pregnancy.
- The majority of the boys (68 %) are also conscientious when it comes to contraceptive issues.

That means it is generally both sexes who have a sense of responsibility here. As part of this current survey about Youth Sexuality the sexually active adolescents and young adults in steady relationship were asked more about this. At 55 percent, the majority said: 'We are both responsible for contraception.' However, even the overview reveals that the female respondents are more likely to hold the main responsibility here (see Figure 6).

Responsibility for contraception within a relationship

Question: Which one of you is responsible for contraception? Who takes care of it? Meaning: who obtains the contraception, who bears the costs etc.?



Basis: 14- to 25-year-olds who have had heterosexual intercourse more than once who are in a heterosexual relationship | figures in percent

Source: BZgA, dataset Youth Sexuality, 2019 survey

Figure 6

And: who is responsible for contraception changes over the course of a person’s sex life. In the beginning the male partner still feels much more co-responsible. If boys and young men are in relationships where they have had sexual intercourse up to ten times, 20 percent of them say that they are the main person responsible. Among the girls and young women the figure is similar at 21 percent.

With increasing experience a stronger shift towards the female partner takes place. If the respondents have had sexual intercourse more than 50 times, only 7 percent of the male respondents say they were responsible for the contraception. The figure among the female respondents is now 46 percent.

This shift goes hand-in-hand with the shift towards the exclusive use of the contraceptive pill, which is the norm in steady relationships. If the contraceptive pill was used during the most recent sexual intercourse in a relationship, 48 percent of the girls and young women say they themselves were responsible for contraception (boys/young men: 4 %).



References

Census UK (2019): Tolland, L. & Evans, J. (2019, February 21). *What is the difference between sex and gender?* Gov.uk; Office for National Statistics. Available at <https://www.ons.gov.uk/economy/environmentalaccounts/articles/whatisthedifferencebetweensexandgender/2019-02-21> [accessed 3 April 2023]

Statistisches Bundesamt (Destatis). (2021). *Migrationshintergrund* [Migrant Background]. Available at <https://www.destatis.de/DE/Themen/Gesellschaft-Umwelt/Bevoelkerung/Migration-Integration/Glossar/migrationshintergrund.html> [accessed on 19 Oct 2021]

Notes on the data



- As the percentages shown has been rounded to whole numbers, it is possible that they may not add up to 100 percent.
- For the same reason the combined categories (e.g. 'very satisfied' and 'mostly satisfied') can deviate from the sum of the individual categories depicted.
- For questions where the respondents were able to pick several answers, the total figure can exceed 100 percent.
- Where data is available from previous surveys, the survey results are shown in a trend comparison. Because of how the samples were done it is possible to see the long-term trend covering almost 40 years for boys and girls between 14 and 17 without a migrant background.
- Participants are deemed to have a migrant background if they themselves or at least one parent was born without German citizenship; this definition is also used by the Federal Statistical Office of Germany (Statistisches Bundesamt, 2021).
- The level of education is determined by the (desired) qualifications the study participants were / are seeking at school based on the education system in Germany. Low: 9 years of school, most are around 15 years old when they leave (e.g. Hauptschule) Moderate: 10 years of school, most are around 16 years old when they leave (e.g. mittlere Reife). High: 12 to 13 years of school, most are 18 to 19 years old when they leave (e.g. Abitur).
- Because of the methodological design of the Youth Sexuality Study a further non-binary differentiation of gender has had to be left out. For this same reason, the term 'sex' (biological aspects, assigned by birth) continues to be used (in contrast to 'gender' in the sense of social construction, gender identity as personal internal perception of oneself) to enable statements on long-term trends (see also Census UK, 2019). This decision is purely a methodological necessity and not based on a lack of awareness of diversity here.

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The Research Project: Background, Research Team, Methodology

The Federal Centre for Health Education's (BZgA) representative study Youth Sexuality 9th Iteration is a repeat survey. In the summer of 2019 the ninth large-scale survey of young people, their parents and young adults began. A total of 6,032 interviews were conducted nationwide. Since 1980, the BZgA has been investigating the attitudes and behaviour of young people in the Federal Republic of Germany with regard to sexuality education, sexuality and contraception. This current study follows on from the previous years' studies with the explicit aim of illustrating trends.

Project profile

Client	Federal Centre for Health Education (BZgA)
Project lead	Angelika Hessling, BZgA
Survey institute	Kantar GmbH
Survey population	Adolescents and young adults between the ages of 14 and 25
Survey method	Computer-supported combined oral-written survey; for the more intimate questions the questionnaire was to be filled out by the respondents without the interviewers being able to see.
Selection method	A disproportionately selected quota sample with regards to sex, age and migrant background
Sample of young people	6,032 interviews of which 3,556 were with adolescents between the ages of 14 and 17 and 2,476 with young adults between 18 and 25
Sample: parents	In the households of the 14- to 17-year-old adolescents without a migrant background one parent was also surveyed (2,422 interviews)
Weighting	All the data shown underwent a representative weighting in order to remove the sample's disproportionalities caused by the design.
Survey period	May to October 2019



More information about the study Youth Sexuality 9th Iteration Central results and further fact sheets

<https://www.sexualaufklaerung.de/en/english/projects/detail/youth-sexuality-9th-iteration/>