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Determinant factor structure of sexual abortive surfer

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Abstract. The exploration of the determinant factor structure of abortive sexuality is the aim of this work. A non-experimental study was carried out with a non-probabilistic selection of 215 students from a public university, considering their participation in sexuality workshops, internships and professional service. Ac transferability, selectivity, compatibility, responsibility, entrepreneurship and innovation whose composition explained 80% of the total variance, but the research design merely finds the stage of research, suggesting the inclusion: a structure of six factors observed of other factors that the literature identifies as pathologies: Stalking, Trolling, Stashing and Bullying.

Keywords: sexuality, pregnancy, Internet, structure, factors

[es] Estructura factorial determinante del aborto

Resumen. La exploración de la estructura factorial determinante de la sexualidad abortiva es el objetivo de este trabajo. Se realizó un estudio no experimental con una selección no probabilística de 215 estudiantes de una universidad pública, considerando su participación en talleres de sexualidad, prácticas y servicio profesional. Ac transferibilidad, selectividad, compatibilidad, responsabilidad, emprendimiento e innovación cuya composición explicó el 80% de la varianza total, pero el diseño de la investigación se limita a encontrar la etapa de la investigación, sugiriendo la inclusión: una estructura de seis factores observados de otros factores que la literatura identifica como patologías: Stalking, Trolling, Stashing y Bullying.

Palabras clave: sexualidad, embarazo, Internet, estructura

Sumario: 1. Introduction. 2. Method. 3. Results. 4. Discussion. 5. Conclusion. 6. References.

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1. Introduction

The purpose of this research was to establish the reliability and validity of an instrument that measures six dimensions of perceptions and expectations reported in the literature regarding abortion; accessibility, selectivity, compatibility, co-responsibility, entrepreneurship and innovation.

The binomial citizenship and State focuses its differences on the establishment of an agenda in which its priority themes reflect the tension, but also anticipates conciliation scenarios. It is the case of abortion that has been on the public agenda since traditional media such as television, radio, the press or the cinema stigmatize those who decide to request the interruption of pregnancy (Amemiya, Valdes, Carreon, Garcia and Hernández, 2018).

However, the advent of Information and Communication Technologies (ICTs), as well as the proliferation of electronic devices has generated a new digital agenda in which abortion remains a controversial is-

sue and triggers negotiations, mediations, conciliations, arbitrations and prosecutions in the digital networks of: Facebook, Twitter and Whatsapp (Anguiano, Aldana, Valdés, Delgado and Garcia, 2018).

The theory of the governance of reproductive health and abortive sexuality suggests that private life has been determined by the relationships established between rulers and the governed. In that sense, it is possible to notice political systems, government regimes and forms of State where abortive practice is tolerated, penalized or, it is extolled as a feature of freedom, safety and public health (Bautista, Aldana and García, 2018).

In the framework of the transformation of the State and the democratization of institutions, the trident regarding the request for legal interruption of pregnancy, consensual assistance and social networks on the Internet have opened the discussion on the relevance of social work in hospitals and hospitals public health. The history of social work, like that of public health institutions, has gone from charity and

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charity to the contrast of intervention models derived from research on the quality of public attention (Carreon, Hernandez, Morales and Garcia, 2013).

However, the transformation of the State and the democratization of institutions have gone from the sponsorship of authoritarian regimes to the deliberate participation of citizenship through observatories or organizations of sexual and reproductive rights (Delgado, Méndez, Morales, Garcia, Mendoza and Vilchis, 2018).

In the case of abortion, a central issue in the policies of birth control and family planning for the abatement of the population explosion has generated conflicting positions in which emerge sociopolitical or psychosocial factors that would explain the trident exposed to the principle of this section (Garcia, 2012).

In reference to the index of human development (education, health and work), reproductive sexuality seems to travel along an opposite path, as in the case of entities such as Mexico City, Baja California, Chiapas, Tlaxcala or Hidalgo. Abortive practice has been identified as an alternative for vulnerable, marginalized or excluded groups around which the demographic explosion would aggravate their quality of life (Garcia, Bustos, Carreon and Hernández, 2018).

The state of Baja California occupies the first place in terms of the rate of interruption of pregnancy in a population between 15 to 45 years and Tamaulipas has the largest number of cases in population from 15 to 24 years. In contrast, Chiapas has a lower number of abortions, but its degree of human development is lower than that of entities with a higher abortion rate. In the case of the period of life that goes from 25 to 34 years, the entity of Baja California occupies the first site, but its degree of human development is a consequence of the group between 15 and 24 years in which occupies the third site. On the contrary, the state of Tlaxcala seems to inhibit the interruption of pregnancy with respect to its human development. Campeche, which occupies the first place in terms of the abortion rate among women aged 15 to 24 and 35 to 49, is in a situation similar to Baja California, although the state of Hidalgo inhibits the interruption of pregnancy with a degree of development similar to that of the other two entities (Garcia, 2013).

Health, education and employment seem to be related to reproductive sexuality in an inverse sense. In the case of Mexico City, which is the state with the highest Human Development Index (HDI), the prevalence of abortions is more related in a negative sense, although in the order of 35 to 49 years it tends to be positive. That is, human development seems to be affected by other factors around reproductive sexuality. These data are relevant for the establishment of reproductive policies and sex education programs, since in the period of life that goes from 15 to 24 years, it supposes the academic formation that has been considered as an instrument of human development in the face of vulnerability, marginality and exclusion that means a large family without university

studies (Garcia, Carreon, Aguilar, Rosas and Garcia, 2014).

The theory explains the relationship between human development and reproductive sexuality within the framework of the transformation of the State and the democratization of institutions. From the trident of freedom, equity and justice, the theory proposes that the reproductive participation in the social networks of the Internet is the product of the transition from the authoritarian political system to a co-responsible political system. It is a scenario in which the State provides social services based on criteria of sexual and reproductive freedom, with gender equity and retributive justice (García, 2018).

However, the social services that derive from the democratization of health institutions suppose the renunciation of the welfare and clientelist system, which has been implemented by the State to guarantee social development conditioned on the political support of vulnerable, marginalized or excluded sectors. This is how the socio-political assistance provided by clientelism, evidently, intensified its transformation into social and feminist welfare, and from there it arrived at the construction of agreements around reproductive health policies (Garcia, Carreon, Hernandez, Bautista and Mendez, 2012).

The impact of the transformation of institutions in the professional practice of social work has become the study of participation, which, like the welfare system, has had a corresponding version. As the institutions have been democratized, the participation of the citizens has been intensified and guided by criteria of rationality, in which the inclusion of marginalized and excluded groups has determined the management of social services towards a broader spectrum of society, although the contribution of these transformations to the pregnancy request lies in their models of reproductive assistance, which evidently are not only limited to the channeling, follow-up or socioeconomic diagnosis of applicants, but also include the investigation of sexual and reproductive health (Garcia, Delgado and Limon, 2018).

In this sense, the theory anticipates the emergence of an inclusive model in which sexual and reproductive diversity begin with decriminalization and establish dialogue with perceptions. Regarding the studies related to reproductive assistance, these show the prevalence of eight dimensions in which: 1) consensus, 2) commitment, 3) self-management, 4) attitudes, 5) socialization, 6) beliefs, 7) communication and 8) supervision has been identified as its reflective factors (Garcia, Delgado, Morales, Mendez, Garcia and Vilchis, 2016).

However, reproductive assistance is in the making since it has focused on medical or psychological cases related to risks of childbirth, rape or malformation, but they have not studied the identity that involves the participation of groups with different abilities or different sexual orientations. In other words, reproductive health policies seem to have conditioned the

social care cases by their degree of medical commitment has justified the termination of pregnancy, or those cases where reproduction capabilities defined to interruption gestation (García, Morales, Mendez, Delgado, Vilchis and Nava, 2015).

That is why the state of knowledge has explained from psychosocial, socioeconomic or demographic factors the relationship between health professionals and users of public services, but reproductive participation has been inhibited when considering that users are subjects of care, ignoring their knowledge, preferences and responsibilities innovations. By virtue of the fact that the relationship between society and State has diversified, allowing institutions to include users of public health services in the construction of a promoter identity and manager of health and quality services, either by their evaluations or proposals, we propose the contrast of a model in which accessibility, selectivity, compatibility, accumulation, consensus, responsibility, entrepreneurship and innovation; indicate the emergence of a welfare model guided by consensus and established by the citizen debate (Morales, Lopez, Delgado, Mendoza, Garcia and Olvera, 2018).

In this model, access to social networks linked to self-exploration would determine the prevention of sexual diseases, or the debate on sexuality as the basis of contraception or the request for abortion. Access to information involves the selection of content that in principle conforms to beliefs, but given the diversity of opinions and experiences, the Internet user would enrich their criteria of sexuality and reproduction (Perez, Garcia and Perez, 2018).

Both aspects, access and selection of information are a consequence of the narrowness between sexual and reproductive lifestyles with respect to the diversity of contents regarding coitus, illnesses, risks, experiences or preferences. A consequence of the three indicators implies an accumulation of knowledge, skills, values and experiences that would determine participation in forums and self-help or self-support groups (Quintero, Valdés, Delgado and Garcia, 2018).

Once the information is available and subject to questioning, the next step that would indicate a reproductive participation is the establishment of agreements based on the repertoire of proposals. However, that sexual and reproductive diversity is subject to discussion for the full use of freedoms and the granting of opportunities, the responsibility of users with respect to the dissemination of proposals in accordance with the rights of groups regardless of preferences, status, resources or ideologies is fundamental. Beyond the responsibility for not having other value, but the initiatives are the consequences of the freedoms and opportunities that allow the development of capacities in terms of preferences and discourses related to the inclusion of vulnerable, marginalized or excluded groups (Sandoval, Garcia y Bustos, 2016).

Innovation understood as the generation of phrases or styles of sexuality that would trigger application of power interruption is the culmination of a process in-

volving the emergence of citizenship according to the transformation of the state and the democratization of its institutions (Vilchis, Velez and Garcia, 2018).

However, Internet social networks are also scenes of sexual harassment or harassment that far from promoting consensus, responsibility, entrepreneurship or innovation generate aggression and promote violence towards vulnerable, marginalized or excluded groups. The model would explain the positive dimension of reproductive participation on the Internet, but its contrast would also indicate negative dimensions such as harassment or harassment. That is why an increase in agreements, responsibilities, undertakings and innovations; it would explain a reproductive participation, although a decrease would imply a kind of assistance.

Abortion is a public health problem that has been approached from a liberal, utilitarian and empowered approach (Gomez, 2018). The capabilities approach adjusts to the health and social welfare standards required for the sociocultural construction of femininity as an agent of change (Calandria & Ledesma, 2018). From this perspective of empowerment, it is possible to build a culture of equity.

Unlike the liberal approach that focuses its attention on a political framework of the positions in favor of decriminalization, the utilitarian approach is an emerging social movement in which decriminalization is part of a repertoire of instruments for the individual freedom of women (Laudano et al., 2020). Both liberal and utilitarian approaches are distinguished from a cultural approach to female empowerment.

Equity is legitimized from the debate between the conservative and liberal parties (Matarrollo, 2020). This is the case of the sentences executed in the national courts of the countries that have postulated the decriminalization of abortion (Messore, 2020). In this sense, the approximation of the capacities of the individual to establish their freedom of choice regarding the interruption of pregnancy reliably explains the differences between those who are for and against decriminalization.

The scenario in which the legitimacy of the movements against or in favor of decriminalization takes place is in the media and in electronic social networks (Maier, 2018). The conflict and differences between the parties is observed in the electronic media (Santarella, 2017). This is the case of religious groups against decriminalization versus progressive groups that favor decriminalization (Curtidor, 2017). The differences between both groups were manifested in the media, moving to social networks such as Facebook, Twitter, Instagram, WhatsApp, TikTok or YouTube (Ingrassia, 2020). It is about the mediatization of the interruption of pregnancy as a strategy of incidence or construction of public policies of decriminalization.

Therefore, the objective of the present work was to contrast the dimensions related to the legal interruption of pregnancy with respect to the observations to be made in the present work.

Will there be significant differences between the dimensions reported in the literature with respect to the dimensions observed in the present study?

The premises that guide this study suggest that the liberal, utilitarian and empowerment dimensions can be observed from factors such as accessibility, selectivity, compatibility, co-responsibility, entrepreneurship and innovation related to the surrounding information in the media and in the media. electronic networks. In this sense, the accessibility of information is associated with the selection of data to make decisions according to freedom of choice (Galiano, 2016). The accumulation of information generates in individuals shared responsibilities, or else, absence of agreements (Prada et al., 2019). Dissent is associated with the ability to inhibit life projects, but also with innovation in the face of conflicts or differences with groups opposed to freedom of choice.

2. Method

An exploratory and transversal study was carried out. The surveyed sample was selected from the database of the Autonomous University of the State of Mexico, Huehuetoca Professional Academic Unit, considering pregnancy, motherhood or parenting, as well as cooperation in entrepreneurship financed by the State through micro credits. . The sample belongs to the area of social sciences and humanity, degrees in Social Work, Communication, Actuary and Languages. A non-probabilistic selection of 215 students from a public university was made based on the inclusion criteria related to the knowledge of induced abortion as a reproductive right and the use of Facebook, Twitter and Google+ to express an opinion about sexuality. 125 are men and 90 women; 55 with less than 18 years of age, 70 with more than 18 years and less than 22 years and 100 with more than 22 years. The average family economic income was 937 USD (SD = 16.25 USD). 70% reported having sex before the age of 18, while 25% reported having sex after the age of majority and 5% refrained from answering the question. 92% used the male condom for their first sexual intercourse, 5% used the female condom and 3% refrained from answering the question. 74% use Facebook to comment on sexuality, reproductive health or induced abortion; while 23% use Twitter to post their opinions and 3% use Google+ to share their ideas about sexuality. 95% have recommended the use of male condoms to avoid pregnancies and 5% have opined in favor of the use of the female condom. 90% said they would use the pregnancy interruption service, 7% would have the baby and 3% did not answer the question.

The Abortive Sexuality Scale of Garcia (2011) was used, which includes 42 items on accessibility, selectivity, compatibility, co-responsibility, entrepreneurship and innovation around the request for induced abortion. Each statement includes four response options ranging from = 0 “not likely” to 4 =

“very likely”; only in the case of compatibility the options are: 0 = “it does not look like me” until 4 = “it looks a lot like me”

Accessibility. It refers to the opportunities of dissemination of information related to the decriminalization of abortion, the procedure of interruption of pregnancy or the request of uterine curettage through the intensive use of some Information and Communication Technology, as well as through the use of some electronic device or digital.

Selectivity. It alludes to comparisons between the use of digital networks and traditional media such as television, radio, the press or the cinema with respect to the legalization of abortion, the interruption of pregnancy or the request for curettage.

Compatibility. It refers to the differences and similarities between participatory lifestyles in digital networks such as Facebook, Twitter and Whatsapp with respect to assisted legal interruption or the decriminalization of abortion practice.

Stewardship It alludes to the commitments of authorities and Internet users regarding the dissemination of reproductive rights in digital networks such as Facebook, Twitter and Whatsapp.

Entrepreneurship In this specific case, it refers to the promotion of reproductive health and abortive sexuality, on digital networks such as Facebook, Twitter or WhatsApp, with regard to the risks and benefits of the request for termination of pregnancy.

Innovation. It refers to the dissuasion or persuasion of facebolero groups, tweeters or whatsapperos regarding reproductive health and abortive sexuality, as well as the risks and benefits of exercising the rights of women in a situation of pregnancy.

The surveys were carried out in the library of the aforementioned university, in which the students were explained with enough detail, the purpose of the research and the null consequences of the results in their particular academic situation. They were asked to answer with sincerity and honesty and were told that they would have a maximum of 20 minutes to answer. Once the information was collected, it was captured in the Statistical Packages for Social Sciences (SPSS for its acronym in English) and Analysis of Structured Moments (AMOS for its acronym in English) in its versions 22.0.

In order to test the null hypothesis of significant differences between the relationships reported in the literature with respect to the relationships observed in this study, the demonstration of the normal distribution of the responses of the respondents was carried out. A model of reflective relationships was estimated in which the values of the construct and indicators were considered as evidence of reliability and validity, as long as they were located at a threshold higher than 0.30 and the distance between them did not exceed two digits. In order to establish the internal consistency of the responses to the instrument, reliability was estimated, considering values close to unity as evidence of internal consistency. Regarding the adjustment, the chi square pa-

parameter was estimated, in which its level of significance less than 0.05 suggested the acceptance of the hypotheses proposed, but given its sensitivity to the sample size, the Adjustment Goodness Index was calculated. (GFI for its acronym in English) and the Middle Residual Quadratic (RMR for its acronym in English). Regarding the empirical test of the model, the relationships between the variables were estimated, as well as the adjustment of the model to the theoretical relationships reviewed in the literature. The values close to the unit were assumed as an adjustment of the hypothetical model, this with respect to the data observed and close to zero for residual statistics.

3. Results

Table 1 clearly shows the reliability values higher than required (alpha of 0.60) for the Domestic Abortion Sexuality Scale (alpha of 0.878), as well as the internal consistencies of the subscales: accessibility (alpha of 0.881 and 21% of the total variance explained), selectivity (alpha of 0.891 and 19% of the total variance explained), compatibility (alpha of 0.885 and 17% of the total variance explained), co-responsibility (alpha of 0.882 and 13% of the variance explained), entrepreneurship (alpha of 0.886 and 11% of the total variance explained), as well as innovation (alpha of 0.880 and 9% of the total variance explained).

Table 1. Descriptive, reliability and validity of the instrument

R	M	S	K	A	F1	F2	F3	F4	F5	F6
r1	3.14	1.45	1.18	0.801	0.403					
r2	3.20	1.39	1.19	0.832	0.405					
r3	3.54	1.30	1,16	0.846	0.446					
r4	3.59	1.24	1,15	0.801	0.482					
r5	3.82	1.46	1.30	0.824		0,491				
r6	3.25	1.49	1.10	0.815		0.405				
r7	3.14	1,27	1.18	0.835		0.403				
r8	3.04	1.24	1.79	0.802		0.503				
r9	3.56	1.35	1.95	0.814			0.501			
r10	3.35	1.50	1.74	0.824			0.506			
r11	3.15	1.49	1.38	0.851			0,546			
r12	3.57	1.30	1.01	0.825			0,592			
r13	3.29	1.44	1,89	0.861				0,593		
r14	3.06	1.36	1.90	0.824				0.504		
r15	1.02	1.67	1.95	0.814				0.415		
r16	1.25	1.97	1.75	0.825				0.465		
r17	1.31	1.56	1,89	0.832					0,492	
r18	1.47	1.26	1.94	0.814					0.406	
r19	1.20	1.01	1.68	0.825					0.436	
r20	1.06	1.43	1.03	0.804					0.436	
r21	1.93	1,13	1.75	0.815						0.481
r22	3.25	1,14	1.76	0.814						0,582
r23	3.25	1.34	1.01	0.804						0.503
r24	3.49	1.56	1.96	0.825						0,582

Source: Prepared with the study data, R = Reactive, M = Mean, S = Standard Deviation, K = Kurtosis, Alpha = Internal consistency of the variance of the items that make up the scale. Extraction method: main axes, promax rotation. Adequacy and sphericity [$\chi^2 = 214.23$ (25 gl) $p = 0.003$; $KMO = 0.753$]. F1 = Accessibility (21% of the total variance explained), F2 = Selectivity (19% of the total variance explained), F3 = Compatibility (17% of the total variance explained), F4 = Co-responsibility (13% of the total variance explained), F5 = Entrepreneurship (11% of the total variance explained), F6 = Innovation (9% of the total variance explained). All the items except the compatibility are answered: 0 = not at all likely, 1 = very unlikely, 2 = unlikely, 3 = probable, 4, Very likely being the factor alluded to: 0 = does not look like my situation, 1 = it seems very little to my situation, 2 = it seems little to my situation, 3 = it seems that my situation and 4 = it is very similar to my situation.

Established the six dimensions of abortive sexuality that explain 90% of the total variance explained, we proceeded to estimate the associations and covar-

iances between the factors in order to observe the emergence of a factor of second order (see Table 2 and Figure one).

Table 2. Correlations and covariances between the factors

	F1	F2	F3	F4	F5	F6	F1	F2	F3	F4	F5	F6
F1	1,000						1,987	0,439	0,428	0,673	0,439	0,548
F2	0,438 *	1,000						1,976	0,561	0,540	0,540	0,548
F3	0,329 **	0,549 *	1,000						1,896	0,501	0,672	0,674
F4	0,518 *	0,621 *	0,371 *	1,000						1,874	0,439	0,558
F5	0,672 **	0,543 **	0,420 *	0,680 *	1,000						1,893	0,564
F6	0,540 *	0,420 ***	0,547 *	0,519 *	0,436 *	1,000						1,439

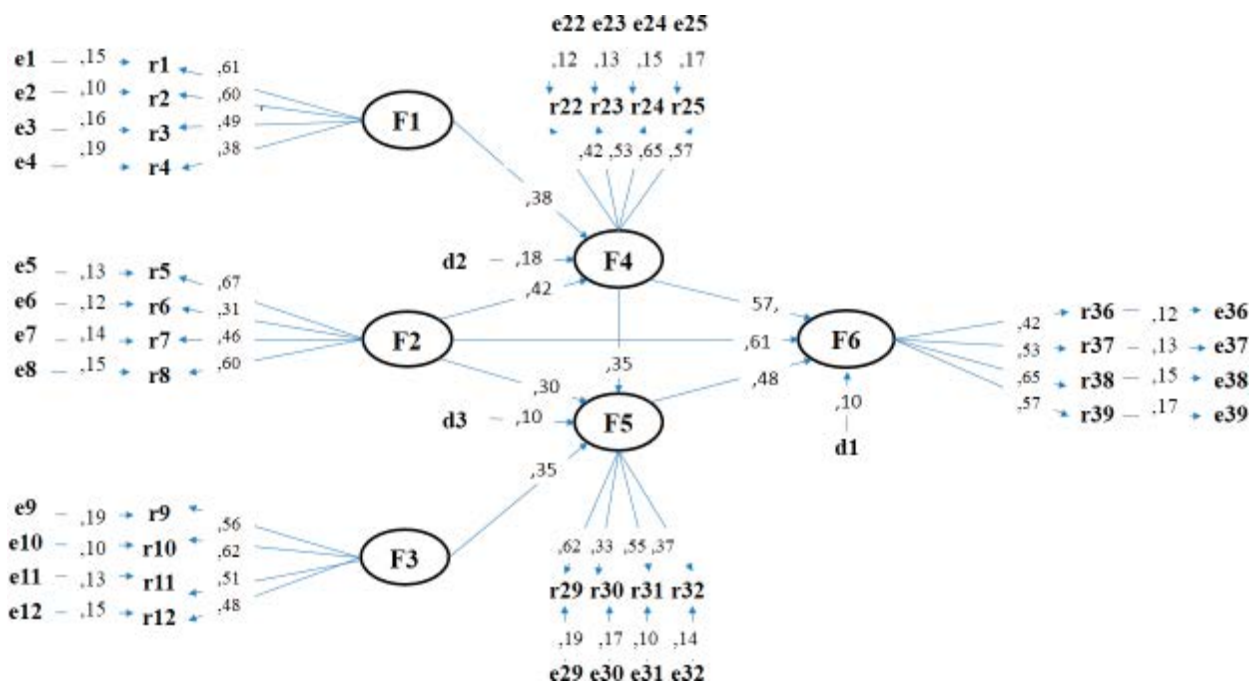
Source: Prepared with the study data, F1 = Accessibility, F2 = Selectivity, F3 = Compatibility, F4 = Co-responsibility, F5 = Entrepreneurship, F6 = Innovation: * p < .01; ** p < .001; *** p < .0001

The compatibility factor is the main indicator of reproductive participation in the social networks of the Internet. That is to say, the sample surveyed seems to collect information referring to the interruption of pregnancy that at any given moment can be used, but to a lesser extent with respect to consensus, responsibilities, undertakings or innovations.

However, the accumulation of information to correspond to the access, selection, compatibility . This

is relevant because it indicates that reproductive participation in the issue of termination of pregnancy follows a process according to lifestyles on the Internet such as medical malpractice, although it is evident that participation is divided into two processes that involve success of the promotion of reproductive health, but the failure of the construction of public policies related to the legalization of induced abortion (see Figure 1).

Figure 1. Structural equation modelling



Source: Elaborated with data study, F1 = Accessibility, F2 = Selectivity, F3 = Compatibility, F4 = Co-responsibility, F5 = Entrepreneurship, F6 = Innovation.

Regarding the adjustment of these relationships, the parameters indicate the acceptance of the hypothesis [$\chi^2 = 24.13$ (24 gl) $p = 0.000$; GFI = 0.975; RMR = 0.003], since the data obtained seem to corroborate the specified relationships.

4. Discussion

The contribution of the present work to the state of the matter lies in the contrast of an explanatory mod-

el of the legal interruption of pregnancy from liberal, utilitarian and empowerment approaches, considering five derived factors: accessibility, selectivity, compatibility, co-responsibility, entrepreneurship and innovation. which explained 71% of the total variance.

In relation to the studies related to the interruption of pregnancy where the liberal, utilitarian and empowerment dimensions stand out, the present work derived five factors that explained the process of access to information until the innovation of responses to the

challenges and challenges of information surrounding on the interruption of pregnancy and the decriminalization of abortion. The results show that data selection predicts innovative responses to surrounding information in electronic media and networks.

Regarding the instrument used to test the null hypothesis regarding the significant differences between the theoretical dimensions with respect to the empirical factors, the adjustment of the questionnaire is recommended. Since it explained 71% of the variance, the inclusion of a sixth factor is recommended, which the literature identifies as a satisfactory experience to explain the dissemination of decriminalization and the request for termination of pregnancy on electronic networks such as Facebook, Instagram, WhatsApp, etc. YouTube, TikTok or Twitter.

If the instrument includes the dimension of satisfaction, then it will be possible to reshape the proposal in order to be able to contrast it in different scenarios and samples. The results suggest that the fit of the model predicts innovative responses as information selection intensifies. This suggests that the users of electronic networks are increasingly exposed to information about the interruption of pregnancy more as an instrument of self-management of their sexuality than as a promotion of their rights and freedoms of choice.

5. Conclusion

In the present chapter it has been found that selectivity is the main indicator of the model that explains the reproductive participation in Internet social networks, but the bias in the use of Facebook by the surveyed sample suggests a study in other social networks in the that the population between 15 and 24 years old accumulates information and from that they make decisions and carry out the dissemination of the acceptance or rejection of legally assisted abortion.

In reference to the studies of beliefs and intentions explain the request for induced abortion, the present study warns that it is the accumulation of information

that explains these beliefs and intentions in favor or against the assisted interruption of pregnancy.

The findings of this work pay the Theory of Deliberative Participation as it anticipates the emergence of a citizen participation around sexual and reproductive health based on their freedoms and capabilities, but opens the discussion about the role of the media of communication in the establishment of sexuality, abortion reproduction as central themes of the public agenda, initiatives and political laws.

Thus, sexual and reproductive health policies aimed at groups of 15 to 24 years old would have a negligible effect on the construction of agreements, responsibilities, undertakings and innovations if their level of human development corresponds to access, selection and compatibility of information. disseminated in the social networks of the Internet as is the case of Facebook. Therefore, it is recommended to investigate other vulnerable sectors of the population that, by using Internet intensively, build a discrete participation around preferences, experiences or opinions regarding sex, condom use, abortion or pregnancy.

The contribution of the present study to the state of knowledge is fundamentally that it introduces the Internet as an agent of social change, this around the debate on the problems related to reproductive health with emphasis on induced abortion.

However, the bias of Facebook as a scenario of information exchange inhibits the very discussion of the topic since the main reason why the respondents use this network is not the promotion or rejection of abortion, but the opinion of their contacts with respect to your daily life Even, the sample indicates that it prefers to upload photos instead of to think about the pregnancy of some of its contacts.

However, the same sample recognizes that in the event of pregnancy, she would discuss this situation with her closest Facebook contacts before making an appointment in a public place. That is why we expect a greater role of social networks in the issue of sexuality, pregnancy and abortion to the extent that the social network promotes reproductive health.

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