

## Sexual violence, pregnancy and abortion during adolescence: Reality of Brazilian society

*Violência sexual, gravidez e aborto na adolescência: realidade da sociedade brasileira*

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**ABSTRACT** Teenage pregnancy is linked to early sexual debut, low socioeconomic conditions, and sexual violence. In 2023, 32.5% of rape victims were between 10 and 13 years old, while the 14-19 age group accounted for 18.9% of the total victims. Therefore, this study aimed to systematize knowledge about the factors involved in sexual violence, pregnancy, and abortion in adolescence within the Brazilian context. This is an integrative literature review, conducted through a bibliographic survey of national and international databases. It was found that 11.9% of live births in Brazil in 2023 were to mothers between 10 and 19 years old, living in unfavorable socioeconomic conditions. Complications associated with pregnancy and childbirth were considered the second leading cause of death among adolescents. In Brazil, from 2020 to 2023, in 44.2% of registered rapes, the victim was between 10 and 19 years old, and it was shown that up to 15% of adolescents become pregnant after sexual violence. There is an association between teenage pregnancy and adverse maternal and neonatal outcomes, such as hypertensive disorders of pregnancy and low birth weight. Teenage pregnancy is a prevalent problem in Brazil, especially among Black and Indigenous adolescents and those from lower socioeconomic backgrounds.

**KEYWORDS** Pregnancy in adolescence. Sex offenses. Abortion. Rape. Epidemiology.

**RESUMO** A gravidez na adolescência está relacionada com sexarcação precoce, condições socioeconômicas baixas e violência sexual. Em 2023, 32,5% das vítimas de estupro tinham entre 10 e 13 anos, enquanto a faixa etária de 14 a 19 anos correspondeu a 18,9% do total de vítimas. Assim, objetivou-se sistematizar o conhecimento sobre os fatores envolvidos na violência sexual, gravidez e aborto na adolescência na realidade brasileira. Trata-se de uma revisão integrativa da literatura, realizada por meio de levantamento bibliográfico em bases de dados nacionais e internacionais. Constatou-se que, em 2023, 11,9% dos nascidos vivos no Brasil tiveram mães entre 10 e 19 anos que viviam em condições socioeconômicas desfavoráveis. Complicações associadas à gestação e ao parto foram consideradas a segunda causa de morte entre adolescentes. No Brasil, de 2020 a 2023, em 44,2% dos estupros registrados, a vítima tinha entre 10 e 19 anos, e foi evidenciado que até 15% das adolescentes engravidam após violência sexual. Há associação entre a gravidez na adolescência e desfechos materno-neonatais adversos, como distúrbios hipertensivos da gestação e baixo peso ao nascer. A gravidez na adolescência é um problema preponderante no Brasil, especialmente entre adolescentes pretas e indígenas e de menor poder aquisitivo.

**PALAVRAS-CHAVE** Gravidez na adolescência. Delitos sexuais. Aborto. Estupro. Epidemiologia.

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## Introduction

Despite differing definitions, adolescence is widely recognized as the period from 10 to 19 years of age. This stage is marked by individuals discovering autonomy and maturing physically and emotionally through different cultural and social experiences<sup>1,2</sup>.

The Statute of the Child and Adolescent (ECA) and the Youth Statute, by establishing duties and rights of adolescents, recognize these individuals as active and socially important subjects and determine that all adolescents are entitled to quality of life and universal, comprehensive health care in accordance with the principles of the Brazilian Unified Health System (SUS)<sup>3,4</sup>. Among the health rights to be ensured are sexual and reproductive rights, which support the understanding that any individual should have autonomy to decide how to experience their sexuality regardless of sociocultural factors. The goal is to ensure that sexuality, sexual activity, and the decision to have (or not have) children are positive, consensual, and healthy experiences<sup>1,5</sup>.

The World Health Organization (WHO) estimates that in Latin America and the Caribbean, 2% of women begin reproductive life before age 15. These regions are the only ones where pregnancies in this age group are rising. Among 15- to 19-year-olds, the region has the world's second-highest global fertility rate, and this number is hardly decreasing<sup>6</sup>. Early sexual initiation before age 15 is associated with more unplanned pregnancies, a greater risk for sexually transmitted infections (STIs), and psychological and emotional harm<sup>7</sup>.

Adolescent pregnancy has also been associated with lower socioeconomic status and reduced educational attainment. For instance, Quilombola, riverside, and Indigenous adolescents have up to four times greater risk of pregnancy before age 20 compared to peers in urban centers with more stable education and housing conditions<sup>6,8</sup>.

High sexual violence rates in this age group also drive adolescent pregnancy indicators.

According to the 2024 Brazilian Public Security Yearbook, 32.5% of rape victims were aged 10-13, and 18.9% were 14-19. The most prevalent consequences related to rape were psychiatric and behavioral disorders like post-traumatic stress disorder and unwanted pregnancy<sup>9-12</sup>.

The probability of pregnancy following rape with vaginal penetration ranges from 0.5% to 5%. In these cases, the option of legal abortion – provided there is consent from the pregnant individual or legal representative – is guaranteed under the Brazilian Penal Code<sup>9</sup>.

Thus, this study aimed to systematize knowledge on factors involved in sexual violence, pregnancy, and abortion during adolescence in the Brazilian context.

## Materials and methods

This integrative literature review followed PRISMA guidelines. The literature search ran through December 2024 using Medline® via PubMed®, Google Scholar, and SciELO.

### Inclusion and exclusion criteria

We included original articles, systematic reviews, and meta-analyses published in English and Portuguese, published from 2019 to 2024. We included only open-access articles available in full text that addressed the following question: Which factors are involved in sexual violence, pregnancy, and abortion during adolescence in Brazil? We excluded duplicate articles, studies with non-Brazilian target populations, and studies lacking clear association with sexual violence, pregnancy, and abortion in adolescence.

### Search strategy and study selection

The search used English descriptors from Medical Subject Headings (MeSH) of the US National Library of Medicine (NLM): “teenage pregnancy”, “sexual abuse”, “abortion”, “Brazil”, “epidemiology”, “outcomes”, and

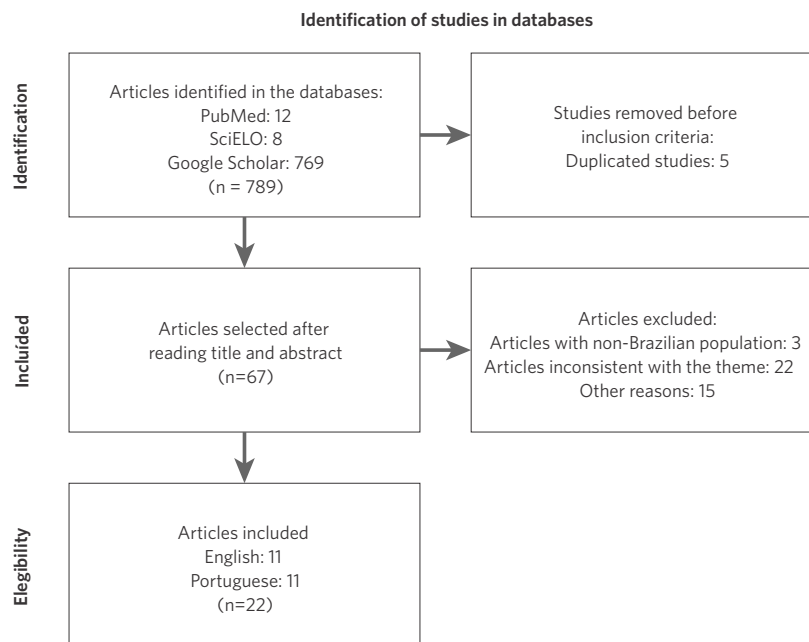
respective translations. These were combined with Boolean operators (AND, OR). Titles and abstracts identified were screened by inclusion and exclusion criteria. Full-texts were then reviewed to confirm eligibility.

## Data extraction and analysis

Data were analyzed descriptively and extracted from standardized main questions,

which were organized into topics related to sexual violence, pregnancy, and abortion in adolescence. Additional questions included study type, period, language, main results and conclusions. We identified 789 studies using the search terms. After applying inclusion and exclusion criteria, we selected 22 articles, 11 in English and 11 in Portuguese (*figure 1*).

Figure 1. Flowchart of the article search for review



Source: Prepared by the authors, 2024.

## Results

Nineteen of the 22 selected articles were original studies, and three were systematic reviews.

The main conclusions are described in *table 1*.

Table 1. Descriptive characteristics of the articles included in the review

Studies	Study type	Objectives	Conclusions
Arruda et al., 2020 <sup>8(733)</sup>	Original article	To determine the mean age at first sexual debut, number of partners, and frequency of contraceptive use among adolescents in a school in Ribeirão Preto/SP.	The age of sexual debut in males ranged from 7 to 18 years, and in females from 7 to 19. Authors found that 66.9% of adolescents reported an active sex life and 36.7% used contraceptive methods most of the time.
Cardoso et al., 2020 <sup>13(4)</sup>	Original article	To describe the situation regarding abortion rates in Brazil.	Women at highest risk of dying from abortion were Black/Indigenous women, low-income, under 14 or over 40, living in the Brazilian North, Northeast, and Midwest, and living without a marital relationship.
Diniz et al., 2020 <sup>14(1602)</sup>	Original article	To evaluate epidemiological data regarding abortion in Brazil.	The 2021 National Abortion Survey (PNA) found that 52% were 19 years old or younger when they had their first abortion. Higher rates were detected among respondents with lower schooling levels, Black and Indigenous women, and residents of poorer regions.
Fonseca et al., 2020 <sup>15(4)</sup>	Systematic review	To update knowledge about legal abortion, regarding the profile of services, the women served, the knowledge of students and doctors, and the situation of anencephaly and severe malformations.	Six studies on the women served identified that they are young, single, and that the main reason for seeking help was pregnancy resulting from rape. Delays in seeking help occurred among the youngest, single women and when the perpetrator was someone close to them.
Veiga Junior et al., 2024 <sup>16(5)</sup>	Original article	To describe the severity of abortion-related complications, associated factors, and the type and quality of care in Brazil.	Most women (82.5%) experienced moderate complications, while 94.2% required uterine evacuation. More severe complications were associated with gestational age > 13 weeks and care provided in Maranhão and Rondônia.
Lopes et al., 2020 <sup>17(2)</sup>	Original article	To analyze the trends and factors associated with teenage pregnancy in a region of Paraná.	Not having a partner, less than 8 schooling years, gestational age less than 37 weeks, cesarean delivery, and an Apgar score of less than 7 in the first minute of life were associated with teenage pregnancy.
Nunes, Madeiro e Diniz, 2022 <sup>18(1135)</sup>	Original article	To analyze maternal deaths among adolescents in Piauí and describe the stories of those who died from induced abortion from 2008 to 2013.	There were delays in the diagnosis and appropriate treatment of abortion complications, which may have contributed to the deaths of the teenagers. The stories of the young women who died from abortion complications highlighted the need for rapid and accessible healthcare, as well as laws and public policies that protect women who decide to terminate their pregnancies.
Montanher et al., 2024 <sup>19(10)</sup>	Original article	To analyze the criminalization of abortion and its consequences for Brazilian women.	Bill N°1.904/2024 does not address the needs of Brazilian women on this issue, does not prevent the exorbitant number of abortion procedures, and does not guarantee the fundamental rights of women in the country.
Monteiro et al., 2020 <sup>20(760)</sup>	Original article	To assess the frequency of teenage pregnancy in all Brazilian regions from 2000 to 2019 and correlate it with the HDI.	The number of live births to adolescent mothers was inversely proportional to the region's HDI. Despite a decline in the fertility rate, the number of teenage pregnancies remains high in the country, with significant regional variations.

Table 1. Descriptive characteristics of the articles included in the review

Studies	Study type	Objectives	Conclusions
Pacó e Rabelo, 2022 <sup>21(3)</sup>	Original article	To describe the epidemiological profile of pregnant adolescents in the Brazilian Northeast from 2015 to 2019.	Most pregnant women were aged 15-19, with 8 to 11 schooling years, single, and self-identified as brown. Prenatal care consisted of 7 or more visits, vaginal delivery, with both premature and full-term births.
Taquette et al., 2021 <sup>22(1)</sup>	Original article	To compare officially reported data on sexual violence against girls aged 10-13 with data on pregnancy in the same age group from 2012 to 2018.	The lack of adequate recording of the rape of vulnerable individuals in official statistics in Brazil has led to an underestimation of its magnitude.

Source: Prepared by the authors from their data<sup>8,13-22</sup>.

## Discussion

### General overview

According to 2023 data, 0.5% among live births in Brazil were to mothers aged 10–14 years, and 11.4% were to mothers aged 15–19 years. These data represented a decline compared to previous years. However, Brazil remains one of the Latin American countries with the highest adolescent birth rate<sup>12</sup>.

The North recorded the highest proportion of live births to adolescent mothers (19.4%), followed by the Northeast (14.4%)<sup>12</sup>. Pregnancy and childbirth complications are considered the second leading cause of death for adolescents – especially mothers under 15 and black and brown mothers<sup>23</sup>. One explanation for this outcome was the association of adolescent pregnancy with unfavorable obstetric outcomes and gestational complications such as gestational hypertensive disorders and postpartum hemorrhage<sup>17,24,25</sup>.

### Social context

Many factors cause adolescent pregnancy and are influenced by intrinsic and extrinsic components related to the mother and the partner. Adolescent pregnancy rates may be explained by socioeconomic and cultural differences,

prevalence of violence situations, and individual decisions or occasional negligence. About 66% of adolescent pregnancies are estimated to be unintended<sup>26</sup>.

Black, brown, and Indigenous adolescents have higher adolescent pregnancy rates and slower birth rate declines than white or Asian peers. This finding may explain high adolescent pregnancy rates in North and Northeast, where populations are mostly non-white<sup>20,27</sup>.

About 60% of Brazilian adolescent mothers gave birth while having had 8–11 schooling years (i.e., incomplete secondary education). Roughly 36% of girls who dropped out of school did so because of pregnancy. School dropout increases the chance of repeat pregnancy and hinders access to higher education. The UN reports that nearly half of mothers aged 10–19 have only domestic duties. Moreover, adolescent pregnancy rates appear inversely proportional to maternal schooling level<sup>21,28-30</sup>.

Adolescents in poor socioeconomic situations are five times more likely to become pregnant than more affluent adolescents<sup>28,29</sup>. This fact may be due to little or no access to information on healthy sexual practices and contraceptive methods, or to the methods themselves. Approximately 70% of adolescents were not in stable relationships when they became pregnant; still, Brazil ranks fourth globally in the number of girls married before ages 15 and 18<sup>27,28,31</sup>.

## Sexual violence

Sexual violence is also a relevant etiological factor for high adolescent pregnancy rates in Brazil. Only about 8.5% of rapes were reported, and 4.2% were identified by the health system<sup>31</sup>. From 2020 to 2023, 44.2% of cases involved victims aged 10–19, and 90% of victims were female<sup>12</sup>.

Moreover, the highest number of rape notifications involved children and adolescents, and most victims had less than eight schooling years<sup>24,32,33</sup>. Data indicate higher pregnancy rates in rape with vaginal penetration in children (10.6%) and adolescents (15%)<sup>34</sup>. From 1994 to 2015, adolescents made up over a third of legal abortion patients, and approximately 86% of procedures were linked to pregnancies from sexual violence<sup>15</sup>.

About 45% of abortions worldwide from 2010 to 2014 were unsafe, with procedures performed by untrained people or under inadequate technical or material conditions, and approximately 97% of these occurred in Africa, Asia, and Latin America. Due to risks of complications such as perforation, infection, and hemorrhage, abortion remains an major cause of maternal death in these regions<sup>13</sup>.

Available estimates on abortion mortality rates indicate that women at highest risk of death are Black and Indigenous women with low educational attainment, living without partners, and aged under 14 or over 40 years, especially in the North, Northeast, and Midwest<sup>13,18</sup>.

Although official abortion databases are lacking in Brazil, the 2021 National Abortion Survey found that approximately 52% of respondents were adolescents at the time of their first abortion, with a mean age of 17 years. Among women who had at least one abortion, about 21% had two or more, with higher prevalence among Black, less educated women. According to the survey, one in seven women terminated a pregnancy

before age 40<sup>14</sup>. In 2019, the PNA conducted only in the Northeast found that approximately 12% of respondents reported at least one induced abortion<sup>35</sup>.

Despite the high prevalence of abortion in Brazilian society and several pieces of evidence of potentially fatal risks associated with unsafe abortion<sup>14,18</sup>, Bill N°1.904 presented in 2024, proposes equating abortion after 22 weeks of gestation to simple homicide, even in cases of sexual violence, potentially imposing greater penalties on rape victims than on perpetrators<sup>19</sup>.

Regardless of legislative approval, which has not yet occurred, the proposal contradicts the sexual and reproductive rights of Brazilian women, particularly adolescents, Black and Indigenous women, those with low income, and low education<sup>14</sup>. Current data on violence against women indicate the need for broader discussion regarding access to safe abortion beyond cases currently permitted by law, as women tend to continue undergoing the procedure<sup>36,37</sup>.

Unsafe abortion is the fifth leading cause of maternal mortality in Brazil and accounts for 4.7% to 13.2% of maternal deaths worldwide<sup>16,38</sup>. WHO estimates that 55% of pregnancies among mothers aged 15–19 years end in abortion, most considered unsafe<sup>23</sup>. It has been described that the younger the individual at the time of the procedure, the greater the complication risk, mainly due to methods used such as herbal preparations and insertion of objects, unlike older women who more frequently use vaginal medications<sup>39</sup>. Consequently, adolescents more often require hospital services for abortion completion, generating higher health system costs and greater vulnerability to adverse outcomes<sup>39,40</sup>.

## Conclusions

We observed that Black and Indigenous adolescents, particularly those with lower

socioeconomic status, have higher pregnancy rates following sexual violence and are more vulnerable to adverse consequences of pregnancy during this period. Moreover, these adolescents experience a concerning reality subject to policies that threaten their decision-making autonomy and fail to provide means to prevent recurrence.

The reviewed studies revealed the need for effective public policies and broader dissemination of discussion on adolescent pregnancy in Brazil, given its implications beyond physical health to social, cultural, and economic domains. Finally, we need to expand discussion on safe abortion, as evidence indicates women continue undergoing the procedure and must be ensured safety, respect, health protection, and sexual and reproductive rights.

## Authors' contributions

Rodrigues JP (0009-0002-7165-3351)\* and Lopes MR (0000-0002-3719-4131)\* contributed to study conception and planning, data acquisition, analysis and interpretation, drafting, and approval of the final manuscript version. Landim CC (0009-0005-3409-9525)\* contributed to data acquisition, analysis and interpretation, drafting, and approval of the final manuscript version. Pinheiro DMA (0000-0002-9527-5060)\* contributed to drafting, critical review, and approval of the final manuscript version. Palácio MAV (0000-0002-2780-125X)\* contributed to study conception and planning, drafting, critical review, and approval of the final manuscript version. ■

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