

Teenage pregnancy and moral panic in Brazil

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Abstract

This paper examines teenage pregnancy as a social-historical construction of increasing concern in Brazil. It presents findings from over five years of empirical research alongside an analysis of a sample of newspaper articles representative of the dominant positions in the Brazilian press concerning teenage pregnancy. In contrast to mainstream arguments and to broader moral panic surrounding teenage pregnancy, we argue that contemporary patterns of sexual behaviour among young people in Brazil do not signal growing permissiveness and are not straightforwardly related to poverty, family dysfunction or lack of life projects on the part of young people themselves. On the contrary, early pregnancy and parenthood retain strong continuities with core Brazilian values and norms of sexual culture.

Résumé

Cet article porte un regard sur la grossesse des adolescentes en tant que construction socio-historique de plus en plus préoccupante au Brésil. Il présente les résultats d'une recherche empirique de plus de cinq ans, accompagnés de l'analyse d'un échantillon d'articles, représentatif des positions dominantes de la presse écrite brésilienne sur la grossesse des adolescentes. En contrepoint des arguments les plus courants et de la panique morale généralisée concernant la grossesse des adolescentes, nous affirmons que les modèles contemporains des comportements sexuels des jeunes au Brésil n'indiquent pas une permissivité croissante et ne sont pas franchement liés à la pauvreté, aux dysfonctionnements familiaux ou à l'absence de projets de vie chez ces mêmes jeunes. Au contraire, la grossesse et la parentalité précoces tendent à prolonger la plupart des valeurs et des normes sexuelles brésiliennes.

Resumen

En este artículo analizamos el embarazo de adolescentes como una construcción socio-histórica que cada vez preocupa más a los brasileños. Aquí presentamos los resultados de un estudio empírico, que ha durado más de cinco años, junto con un análisis de una muestra de artículos de periódicos que representa las posiciones dominantes en la prensa brasileña con respecto a los embarazos de adolescentes. En lugar de argumentos generales y de crear más pánico moral con respecto a los embarazos de adolescentes, sostenemos que los modelos contemporáneos de la conducta sexual entre los jóvenes en Brasil no muestran síntomas de una permisividad creciente y no están directamente relacionados con la pobreza, los problemas familiares o la falta de proyectos en la vida entre los mismos jóvenes. Más bien todo lo contrario; los embarazos y la maternidad tempranos conservan

sólidos vínculos con los principales valores de los brasileños y sus normas en cuanto a la cultura sexual.

Keywords: *Teenage pregnancy, moral panic, Brazil*

Introduction

Since it was first constructed as a social problem in Brazil (Reis 1993, CNPD 1998), teenage pregnancy has been widely reported in the media. In this context, it is most usually portrayed as a phenomenon that highlights social disorder, sexual permissiveness and the reproduction of poverty, thus favouring the perpetuation of urban violence and criminality. At the same time, there has been heated debate among social scientists, demographers, health workers, journalists, parliamentarians and government authorities as to whether birth rates among teenagers need to be regulated. One argument commonly put forward in both scenarios is the allegedly perverse effect of early reproduction on young people's life trajectories.

At the level of the state in Brazil, there exist contraception-related health policies but these have traditionally been organised as 'family-planning' and are directed primarily towards adult married women. There are no specific public policies that address sex education for teenagers, despite the fact that many are sexually active. We recently carried out a five-year study entitled 'Teenage pregnancy: A multicentre study of young people, sexuality and reproduction in Brazil' — *Gravada* (Heilborn et al. 2006). The main concern of this work was to place young people's experience of first sexual intercourse within the broader context of socialization in sexuality and gender and to grasp the impact of teenage pregnancy on the lives of those who experience it. Along with the empirical research, we systematically analysed debate about teenage pregnancy in major Brazilian newspapers.

This paper presents findings from the *Gravada* study together with an analysis of a sample of articles representative of the main positions taken in the Brazilian press. In contrast to the positions often expressed in newspapers, we argue that sexuality and reproduction among young people retain strong continuities with the dominant patterns of sexual culture in Brazil and thus do not show any unusual features that might imply a subversion of these social norms.

Teenage pregnancy in Brazil

Teenage pregnancy is a long-established phenomenon throughout Latin America (Gupta and Leite 1999).¹ Although not a recent phenomenon in Brazil, it is only during the last two decades of the last century that teenage pregnancy has been framed as a social problem. This shift from an empirical fact to an issue of policy concern demonstrates how social problems are socially and historically constructed. Social events that pre-occupy government and civil society not infrequently exist before they are 'discovered' to be problematic (Lenoir 1989, Jenkins 1996). Once this discovery is made, however, the social problem generally assumes a reality in itself: one that is often linked to specific populations and one that is then necessary to explain.

Young people are often portrayed as agents for the transmission of social values, be these linked to continuity or change. In situations where mechanisms that promote social integration are called into question, the tendency is to see young people's questioning as potentially disruptive. Abramo (1997: 29) alerts us to the moral nature of this type of

response when he writes it ‘triggers a kind of “moral panic” which condenses fears and anxieties about any questioning of the social order as a cohesive set of social norms’. Elsewhere, moral panic has been said to arise when ‘a condition, an episode, a person or a group of persons emerges to become defined as a threat to societal values and interests’ (Cohen 1972: 9). Once made visible as a subject to be addressed and once constructed as a social problem, teenage pregnancy is an issue that fits well within this frame.

Teenage pregnancy has become a potent terrain for the production of discourses in both public opinion and expertise. These discourses display a social grammar that reproduces the unequal distribution of power between different actors. There are groups and individuals who enjoy positions that allow them to define what is proper and morally acceptable and there are those whose positions do not allow them to voice their points of view or their choices — this being the case for young parents and their reference groups, mainly their families. Young women who experience early pregnancy are not infrequently targeted by attempts to control and to label their conduct as undesirable and injurious both to their proper development and to the collective well-being. This process is connected to the persistence of a double standard for male and female sexuality in Brazilian society, according to which men are expected to exercise their sexuality while women must restrain it.

In Brazil, some of the first people to mobilize around teenage pregnancy were physicians. Their attention was drawn to the potential risks of spontaneous abortion, premature birth, problems for the mother’s health, risks during childbirth, maternal mortality and, finally, risks to the child including low birth weight and infant mortality. It has since been demonstrated that many of these risks relate more to social characteristics than to age, and that 15–19-year-old pregnant women in general (and their children) are not exposed to higher health risks than older females (Luker 1996; Stern and García 1999). On the other hand, it has also been demonstrated that the risks are higher for pregnant women aged 10–14 years, although it should be recognized that the rate of pregnancy in this age group is comparatively low (Aquino *et al.* 2003).

Despite their imprecision, biomedical arguments continue to be used by a range of social actors to shape public opinion. These actors include journalists, politicians, demographers and other experts. It is also important to note that physicians were quickly joined by psychologists, psychiatrists, psychoanalysts and experts on adolescence in framing pregnancy at an early stage of life as a psychosocial risk, diagnosed on the basis of young people’s psychological immaturity. As a result, early pregnancy has been portrayed as a major problem with serious consequences for both young women and their children.

Another important perspective considers teenage pregnancy to be produced by poverty, poor living conditions, lack of education, lack of information about contraception and poor access to health services (Souza 1998, Gupta 2000). This perspective sees early pregnancy as a factor that reinforces poverty and marginality. Young parents are unable to continue their schooling, are unlikely to find a job and can only count on limited support from their families. Here, there is evidence of a vicious circle: pregnant teenagers are a product of poverty and by giving birth, they reproduce the very causes that produced them.

There are several reasons why teenage pregnancy should be seen as a problem in Brazil. It has recently been suggested that the proportion of births among young women is increasing at the same time that they are decreasing among older women (Berquó and Cavenaghi 2005). However, the reality is that birth rates among young women are not actually increasing. It is the decrease in the birth rates among women from older age groups that makes young women’s pregnancy rates appear to be disproportionately high. Second,

mainstream opinion portrays early pregnancy negatively because a higher proportion of pregnancies and births among young people occurs outside a conjugal union. While illegitimacy is not the only issue here, it plays a strong role in defining teenage pregnancy as an issue that supposedly threatens social order and stability. Third, as new social expectations for youth have arisen — reflected in an increasing rate of education and the lengthening of the schooling period (Sabóia 1998) — early pregnancy and parenthood are highlighted as disasters because they are seen as frustrating the ideal educational path and all its subsequent gains.

Shared both by individuals and by institutions such as the Catholic and Evangelical churches, this mainstream perspective functions to sustain these various social actors' roles as moral entrepreneurs (Becker 1966). As a result, the social environment they create makes the design and implementation of comprehensive public policies extremely difficult. Contrary to the perspective offered by dominant discourses, the approach offered here acknowledges the diversity of youth. The experience of being young encompasses very different realities of region, social class, gender and race. Moreover, in Brazil there is an intertwining of traditional parameters with more recent ones, which creates a complex and ambiguous context. For example, although many families today are aware of young people's sexuality, the subject of sex and, consequently, contraception remains silenced in family conversation. The broader social environment is not very different. In schools, for instance, sexuality and contraception are not openly addressed because sex education is not a priority. Christian churches of all types — both Catholic and Evangelical — have opposed the introduction of sex education in schools, as well as the implementation of public policies that favour contraception.

Teenage pregnancy in the mainstream Brazilian press

In 1999, the Brazilian newspaper *O Globo* published a very influential article by José Serra, then Minister of Health, entitled 'Child-mothers'. In this article, Serra proposes that the Ministry of Health should initiate a campaign to change sexual behaviour among young people. He blames the media and television soap operas for stimulating 'precocious erotisation, uninformed sexual initiation and accidental and undesired pregnancy' (Serra 1999: 8). At about the same time as this article appeared, the *Gravada* study had begun work, focussing on sexual initiation and gender relations among young people in Brazil. This coincidence of timing allowed us to explore more critically the idea of sexual permissiveness among teenagers that was portrayed in Serra's article. At the same time, it also encouraged us to pay close attention to opinion makers in the press. Thus, from the publication of the 1999 article up to the present, we have systematically followed the subject of teenage sexuality and reproduction in Brazil's four major national newspapers: *O Globo*, *O Estado de São Paulo*, *Jornal do Brasil*, and *Folha de São Paulo*.

Importantly, other interpretations of the issue are occasionally conveyed by newspaper articles but, because they tend to be published in the alternative press, they do not create public opinion in the same way as articles published in major newspapers do. This is the first reason for which they are not analysed in detail here. A second reason is that these alternative articles are generated or informed by researchers whose perspectives are more closely aligned to our own, which means their interpretations are in a large measure already present in our arguments.

To provide a context for discussion of teenage pregnancy in the Brazilian press, it is appropriate to begin by focusing on newspaper articles' headlines, because these themselves are suggestive of the sensationalist and moralist slant with which teenage pregnancy is approached. Typical titles include: 'Big bellies don't fit with school' (Escóssia 2005a), 'Fertility five times higher in *favela*' (Escóssia 2005b), 'A decade of precocious maternity' (Marques and Medeiros 2004) and 'Precocious pregnancy diminishes quality of life' (Petry 2001). The list could be extended but what it is important to recognise is that the headlines induce an environment of moral panic, which is closely related to the perspective used by major newspapers to link poverty with violence and criminality in Brazil.

For the purpose of this paper, we have selected a number of articles that offer an overview of the terms on which discussion on teenage pregnancy has been carried out in the Brazilian mainstream press. We have privileged more recent newspaper articles in this selection because they reproduce the same themes as those published between 1999 and 2004.

'Needy people multiply frighteningly' was published in *O Globo* on 3 April, 2005 (Vieira 2005). Written by Andréa Gouveia Vieira, a journalist and city councillor for the Brazilian Social Democracy Party, the article establishes a direct relation between the birth rate and poverty, signalling a neo-Malthusian approach to the fertility of the poor. According to Vieira, this 'frightening multiplication of the needy' is to be solved by family planning by women *favela* (shanty town) residents; otherwise, the two remaining alternatives are unwanted pregnancies — with the poor multiplying themselves as a result — or abortion. Abortion was, and still is, prohibited in Brazil. Because of this, the mention of abortion in Vieira's article functions both to signal the absence of alternatives (other than for *favela* residents to refrain from procreation) and to feed a social imagination that favours panic, once it signals the idea that either there is birth control among the poor or they will multiply themselves in geometric proportions.

It is worth mentioning that an earlier article by the same writer, 'Voyage to the depths of Rio' (Vieira 2004), led the then mayor of Rio de Janeiro to declare: 'Unless there is family planning in the *favelas*, nothing can be done for Rio de Janeiro' (Maia 2004). The underlying message of Vieira's articles is clear: the only solution to poverty and criminality in Rio de Janeiro is family planning, meaning contraception, in the *favelas*.

'Teenage pregnancy has a cure' was written by award-winning Brazilian journalist, Gilberto Dimenstein (Dimenstein 2005). His human rights reporting and books designed to help teach young people about citizenship have been influential both nationally and internationally. Dimenstein is a member of the executive board of the 'Pact for Children' at the United Nations Children's Fund. In the title of the article, Dimenstein expresses prejudiced thinking prevalent on this subject: namely that teenage pregnancy is a social illness. He describes the work of an integrated care centre in São Paulo where young people from poor families learn to 'avoid pregnancy'. Dimenstein claims that early pregnancies occur not for lack of information, but for lack of a life project: 'What is essential for young people is to have a life project, which comes with self-esteem and self-respect', he argues, including schooling and a career. Although correct as a general claim, Dimenstein's advocacy of the value of having a life project is disembedded from its social context, with the result that the presence or absence of a life project is seen as an individual responsibility. Dimenstein ends by endorsing the view that teenage pregnancy befalls those who do not succeed in elaborating their life projects, which in turn leads to the idea that young people *themselves* are to blame for frustrating their potential. At root, this reinforces the view that pregnancy marks the end of young people's lives.

'Time-Bomb' was a 2005 editorial published in *O Globo* (Editorial 2005, 6) at a time when this newspaper made teenage pregnancy the subject of both front-page articles and editorials for more than a two-month period. The alarmist tone of the headline expresses once again the direct relationship between birth rates and catastrophe. The text identifies the causes of the explosive growth in early motherhood as being 'the ever-earlier awakening of sexuality and general laxity of customs'.

In this same issue of *O Globo*, the editorial is preceded by two front-page articles which carry the following headlines: 'Pregnancy takes 25% of teenage girls out of school' and 'An unequal country since pregnancy'. The former uses findings from a study conducted under the auspices of the United Nations Educational, Scientific and Cultural Organization that show that pregnancy was the prime cause of school drop-out among 15–19-year-old girls. Claiming to be based on data provided by the Instituto Brasileiro de Geografia e Estatística (IBGE), the second article suggests that a growing number of 10–14-year-olds are becoming mothers. However, such a reading of the IBGE study is not fair, given that its data provides no basis for estimating birth rates among teenagers. Despite numerous letters of protest from demographers, the figures used in this article came to be reproduced in several other articles on the subject.

In its 20 March 2006 issue, *O Globo* published a front-page article by Marina Magessi (Magessi 2006, 16), a prominent police authority in the city of Rio de Janeiro, with the title 'Drama of drug-trade children: Food for thought'. The article discussed the reactions to the documentary 'Falcon — boys of the drug trade', filmed between 1998 and 2003 and shown on a Sunday evening television show the night before. The film focused on 16 children and teenagers involved in drug trafficking — 15 of them now dead. The association between socially undesirable births and criminality comes through subtly, but repeatedly throughout the text, until summarized in a police inspector's statement — 'Killing outlaws is not the solution, we have to stop them from being born'.

The Gravad study

But let us turn now to research of a rather different kind. The *Gravad* study was conducted between 1999 and 2004 in Porto Alegre (Rio Grande do Sul), Rio de Janeiro (Rio de Janeiro) and Salvador (Bahia). All three research sites are state capitals; being located respectively in south, south-east and north-east Brazil, very different regions in social and economic terms. *Gravad* analysed the way in which teenage pregnancy has been socially constructed as a problem in Brazil. It also sought to identify the categories employed both by experts, opinion makers and others in framing and examining this process.

More specific goals were to understand learning about sexuality and gender relations that surrounds the first experience of sexual intercourse, to evaluate the extent of teenage pregnancy in the three focused cities and to evaluate the impact of teenage pregnancy on the lives of those who experienced it (dropping-out from school, earlier entry in job market, marriage or separation and family support).

The research took place in two phases. The first phase, from 1999 to 2000, took the form of qualitative semi-structured interviews involving 123 young people, 41 per city. The second phase comprised a household survey, which consisted of a three-stage, stratified, probability sample of men and women aged between 18 and 24 years ($n=4,634$). This survey was completed in 2002. Here, we will focus on some of the quantitative data provided by this second phase of the work.

The household survey was guided by a structured questionnaire developed on the basis of the findings that emerged from the initial qualitative stage. The questionnaire comprised

a similar array of questions for both sexes. It sought to explore key events in the interviewee's affective and sexual trajectory: first and last sexual relationship, first relationship lasting three months or more (with sexual relations), first regular union, first separation, first and last pregnancy, first and last child, first abortion (spontaneous and induced) and present partner. Many of the questions asked were based on those used in leading studies conducted in other nations, including work by Spira *et al.* (1993) and Laumann *et al.* (1994).

Overall, the *Gravad* study can be characterized by two main features. First, it subordinates the issue of teenage pregnancy to a broader analytical framework of partnered sexual learning and experimentation (Gagnon and Simon 1973). Our strategy of adopting the concept of 'youth as process' (Galland 1997) rather than 'youth as age group' was central to the strategy of evaluating how teenage pregnancy or parenthood unfolds in actors' lives. Secondly, our interviewees were young people from 18–24 years, that is, a slightly older age range than that which the World Health Organization defines as adolescent (10–19 years old). Including members of an older population made it possible to evaluate the effects of subsequent events on respondents' sexual lives and pregnancies, as well as the impact of pregnancy and parenthood on their life trajectories.

The beginning of a sex life

Contrasting with the idea that young people's sexuality is without rules, the beginning of sex life with a partner was seen by interviewees as one moment in a process of progressive physical and relational exploration, characterised by stages of variable duration. The great majority of the young people who participated in the *Gravad* study had already experienced a steady affective relationship with some degree of commitment (90% of males and 76% of females) before they experienced first sexual intercourse. Among both males and females, the first dating occurred just before they reached 15 years of age and was slightly later only among those who continued into secondary or higher education.

Females and males differed, however, with respect to first going steady and first experiencing a sexual relation: sexual initiation was reported as coming at least four years after the start of the first steady relationship for 38% of the females and 23% of the males. This time lag between beginning a love life and sexual initiation was particularly characteristic of women from lower-income groups who were in the process of upward academic mobility.² A lengthy, chaste, almost old-style steady relationship clearly differentiated young women on an upward academic path from those who never got beyond primary school. Young women with little schooling began their sex lives soon after they started going steady. Women from more privileged social sectors who had secondary or higher education also displayed a tendency to postpone the start of their sex life, though less markedly so. These results underscore how tightly sexual experience is related to social conditions and gender expectations. They point to a gender-informed evaluation of what going steady implies and suggest that level of education has more weight than social class background as a factor influencing the beginning of sexual life among young women.

Gender differences in sexual initiation

The first sexual relationship was usually described by interviewees with reference to the age of first intercourse. The timing of young women's entry into sexuality was moderated significantly by several individual and social variables; this was not so obvious among men.

Overall, *Gravada* data reveal that sexual initiation occurs earlier for men than for women (at 16.2 against 17.9 years of age, respectively). The study showed that there is a greater degree of homogeneity in the median age of men at their first sexual relation. Most notable is that there are no differences in these reports by region, by social class or by race. However, there is a degree of diversity regarding factors influencing the trajectories of these young people. Sexual initiation happens slightly later among men with more schooling, while men who enter the labour market early or who start going steady before they are 13 years old had their sexual initiation earlier (median age of 15 years). Earlier access to sex is thus connected to an earlier transition to adult life in individuals' trajectories (Galland 1997).

Young women's behaviour showed greater diversity both by social background and life trajectory. Mother's level of schooling and family income had a strong impact on females' age of sexual initiation. Thus, girls from poorer backgrounds initiated their sex life earlier; and girls with more schooling and upward academic mobility postponed their sexual initiation. Contrary to frequent stereotypes in Brazilian society regarding regions of the country and certain ethnic groups, in the south girls had their sexual initiation earlier than in the northeast, and race was not associated with age of sexual initiation.

Choice of partners was related to the status that was attributed to the relationship. While 86% of the girls declared that they had their first sexual experience with a steady boyfriend and 4% with their husband, only 45% of the boys did so with a steady girlfriend. Half the interviewed men, but only 9% of the women, had their sexual initiation with a casual partner; 5% of the men with a sex worker. Variation in the trajectories by which men began their sex lives contrasts with the more homogeneous trajectories reported by female respondents, who did so almost exclusively with older and sexually experienced boyfriends.

The pace of sexualization within the relationship

The route to encountering a partner is marked by gender differences. Men interviewed reported that they had been dating their partner a median of only one month before their first sexual relation and 17% of them said that they had sex on the very day they met, 15% in the same week. Women, on the other hand, said that they knew their partners for a median of six months before first intercourse, with 57% of them having known their partners for more than four months previous to their first sexual relation. These differences between males and females were independent of social class. These are consistent with gender informed conceptions concerning the attribution of status of partner, according to which women tend to consider a relationship as stable more quickly, while men tend to see their relationships as casual.

Males and females also differed in their statements concerning how they framed their first sexual intercourse. Regardless of social group or age at the time of the first sexual relation, more than half the men (57%) said that they wanted the first sexual relation to take place right away, while only 20% of the females took such an assertive position. The most characteristic female attitude was to report not having had a specific expectation concerning the time of the first sexual encounter — the predominant (52%) response being that they 'had not thought much about the matter' or that they 'expected first sex to happen later' (26%). These kinds of position parallel more general social representations: the first sex act is seen as a 'spontaneous' event and is looked forward to by men, whereas women do not think much about it.

Contraception and protection at 'first time'

Equivalent proportions of men and women (70%) reported using some form of contraception or protection at first sexual relation. In most cases, the condom was the method used. Access to, and use of, contraceptive methods depend directly on how health services are organised in the cities where young people live. There are also clear differences in the levels of protection by social background, ranging from 60% among males and females whose mothers had not attended in school (or whose family income was very low) to more than 80% among young people whose mothers had higher education (or whose family income was high). Degree of protection at first sexual relation ranged from 54% among females with incomplete primary education to 84% among those who had attended higher education.

Issues of contraceptive use in general, and of taking precautions at the time of the first sex, were shown to be relatively independent of each other. The vast majority of interviewees reported having talked about contraception and used contraceptive methods with their partner at first sexual intercourse. This was true of both men and women (85% and 83%). However, not having talked about contraception did not necessarily mean the absence of protection in the first sexual relation. A gender differential exists here: the difference can be understood in terms of male expectation that females should take the measures necessary to protect themselves; it is also the case, however, that a certain pre-disposition may exist among males towards using a condom without any prior negotiation. That possible interpretation is supported by the fact that HIV prevention campaigns have been relatively successful in Brazil, particularly among young people. However, safer conduct does not extend into subsequent sexual relations, for as soon as the relationship gains some degree of stability or trust, condoms are abandoned without being replaced by a consistent contraception behaviour (Cabral 2003, Paiva *et al.* 2004).

As for the 30% of cases where contraception was not used at first sexual intercourse, this was explained in most cases by the argument that the individuals had never thought about contraception (70% of females, 74% of males), which was consistent with what was stated about expectations with regard to first sex itself, i.e. that they 'never thought much about the matter'. Both explanations suggest that spontaneity provides the appropriate script for experiencing first partnered sexuality. This representation of sexuality as spontaneous interrelates with the gender system, which allocates quite specific (traditional) roles for each of the sexes — men should seek to have sexual relation as early as possible, while women must work towards this goal more slowly (Bozon and Heilborn 1996). In a context where female sexual initiation is increasingly early, such a pattern of relationships may lead to a greater number of pregnancies that are unforeseen but not necessarily rejected.

Teenage pregnancy: An unequal experience

Teenage pregnancy is linked to the pace of demographic transition in Brazil (Berquó 1998). It is more frequent among girls who have little schooling and who come from families with little cultural and financial capital. Although rarer, teenage pregnancy is also present in the upper social strata with access to information, methods of contraception and even to abortion, despite it being illegal in Brazil.

According to data from the *Gravada* study, 21.4% of males and 29.5% of females reported having experienced pregnancy before reaching the age of 20. However, for those experiencing pregnancy younger than 15 years of age, the relevant percentages were very small: 0.6% of males and 1.6% of females (Aquino *et al.* 2003). Early gestations most

usually occurred in the context of established affective relationships, with only a small percentage of interviewees reporting a first pregnancy with a casual partner (2.5% among women and 14.2% among men). These results challenge the often-disseminated image that teenage pregnancy occurs in the context of sexual permissiveness.

Study findings also reveal a fact often ignored in debates about teenage pregnancy: namely, 40.2% of the young females who experienced early pregnancy and motherhood had already left school when these events happened. This means that it is not pregnancy that prevents members of this population from achieving further schooling. Girls' schooling shows marked discontinuities involving gaps between age and school grade, as well as interruptions before pregnancy or after the birth of a child. As for the impact of motherhood on schooling, 27.6% of the teenage mothers included in our study reported temporarily leaving school and 18.4% of them left school permanently in the first year after their children were born. The other 13.4% never interrupted school.

Considering profound social class inequalities in Brazil, it is a fact that responsibility for domestic duties comes very early in the lives of girls who belong to less privileged social sectors of society and these duties constitute a process of socialization in the role of being a mother. Thus, maternity presents itself not only as a destiny for these girls, but also as their only possible project of social acknowledgement, given that eventual educational and professional projects can hardly be a reality.

Conclusion

In a country such as Brazil, which faces problems of increasing urban violence and high levels of income inequality, teenage mothers have become targets for intense social recrimination. Child beggars accosting pedestrians or armed teenagers in drug gangs are often pointed to as phenomena resulting from unchecked reproduction among the poorer sectors of the population. There is strong fear that reproduction among teenagers will breed a new generation of young people with no occupation, schooling or place in the labour market and who are thus potentially a danger to public order. This leads to the creation of a climate of reproof and fear, close to what sociologically has been denominated as a moral panic. When conditions of life are unsatisfactory, the terrain is fertile for the development of social explanations that link these precarious conditions to moral dissolution, the absentee state and lack of authority within the family.

There is then an important paradox in contemporary Brazilian culture. On one hand, there is a certain social tolerance towards teenagers' sexuality. On the other, when the proof of this sexuality is evident in pregnant bellies and child births, teenagers are said to display 'sexual permissiveness' and teenage pregnancy is seen to signal the end of a teenager's life. At the same time, early pregnancy is diagnosed as a social disease directly linked to poverty and dysfunctional families, both as result and as cause. In our view, mainstream thought faces up to the problem by blaming the victim.

Contrary to mainstream arguments, teenagers do not live in an environment of sexual permissiveness; instead, they adhere to rules of relationships and sexual life that are at one with Brazilian society's sexual customs. Teenage pregnancies rarely occur outside a steady relationship or stable partnership, even if it is temporary; teenage pregnancy is related to Brazilian women's ideal of motherhood as well as to Brazilian men's ideal of virility. So, far from being deviant, these young teenage mothers and young teenage fathers are following the traditional patterns of womanhood and manhood set out for them by Brazilian culture. Mainstream arguments misconstrue teenage pregnancy by framing it as an issue

straightforwardly related to poor and/or dysfunctional families. Neither does mainstream thought address seriously issues such as sexual education, contraception and the legalization of abortion in Brazil, all of which are essential to the provision of more options.

As for the narrow linkage between early pregnancies and poverty, our understanding is that poverty is not produced by the poor. Therefore, it is not by stopping or regulating the reproduction of poor people, as suggested in newspaper articles, that poverty will be solved. Poverty is, instead, the result of social injustice. It is necessary to tackle the profoundly unequal distribution of income and social structure in order to address the problems of poverty and the lack of projects of life.

Finally, it is important to recognise that early pregnancy can have a profound impact on the lives of those who experience it. It demands a re-organization of their lives. However, as has been shown, it is not a factor that is dramatically responsible for drop-outs from school; nor is it necessarily signified in tragic terms in young people's life trajectories. In our view, teenage pregnancy offers no reason for moral panic: it does however encourage a more comprehensive approach to engaging with children and young people within the logic of human and social rights.

Notes

1. For a discussion on teenage pregnancy in other Latin American countries, see, among others, Palma and Quilodrán 1994; Coll 2001; Guzmán *et al* 2001 and Gogna 2005.
2. Upward academic mobility is here understood as occurring when a young person surpasses their mother's schooling. In Brazil, level of schooling achieved is an important indicator of social mobility.

References

- Abramo, H. W. (1997) Considerações sobre a tematização social da juventude no Brasil. *Revista Brasileira de Educação*, 5/6, 25–36.
- Aquino, E. M. L., Heilborn, M. L., Knauth, D. R., Bozon, M., Almeida, M. C. C. and Araujo, M. J., et al. (2003) Adolescência e reprodução no Brasil: A heterogeneidade dos perfis sociais. *Cadernos de Saúde Pública*, 19 (Suppl. 2), S377–S388.
- Becker, H. S. (1966) *Social problems: A modern approach* (New York: Wiley).
- Berquó, E. (1998) *Quando, como e com quem se casam os jovens brasileiros. Jovens acontecendo na trilha das políticas públicas* (Brasília: CNPD), pp. 93–107.
- Berquó, E. and Cavenaghi, S. (2005) Increasing adolescent and youth fertility in Brazil: A new trend or a one-time event? Paper presented to the annual meeting of the Population Association of America, Philadelphia, Pennsylvania, March 30 to April 2, Session #151, Adolescent Fertility in Developing Countries.
- Bozon, M. and Heilborn, M. L. (1996) Les caresses et les mots: Initiations amoureuses à Rio de Janeiro et à Paris. *Terrain*, 27, 37–58.
- Cabral, C. S. (2003) Contracepção e gravidez na adolescência na perspectiva de jovens pais de uma comunidade favelada do Rio de Janeiro. *Reports in Public Health*, 19, 283–292.
- CNPD (Comissão Nacional de População e Desenvolvimento) (1998) *Jovens acontecendo na trilha das políticas públicas* (Brasília: CNPD, 2 vols).
- Cohen, S. (1972) *Folk devils and moral panics* (London: MacGibbon and Kee).
- Coll, A. (2001) Embarazo en la adolescencia ¿Cuál es el problema? In S. D. Burak (ed.) *Adolescencia y juventud en América Latina* (Cartago, Costa Rica: Libro Universitario Regional).
- Dimenstein, G. (2005) Teenage pregnancy has a cure. *Folha de São Paulo*, 13 March, 12.
- Escóssia, F. (2005a) Big bellies don't fit with school. *O Globo*, 07 May, 7.
- Escóssia, F. (2005b) Fertility five times higher in favela. *O Globo*, 07 May, 13.
- Editorial (2005) Time-bomb. *O Globo*, 11 May, 6.
- Gagnon, J., Simon and , W. (1973) *Sexual conduct: The social sources of human sexuality* (Chicago: Aldine).
- Galland, O. (1997) *Sociologie de la jeunesse* (Paris: Armand Colin).
- Gogna, M. (ed.) (2005) Embarazo y maternidad en la adolescência: Estereótipos, evidencias y propuestas para políticas públicas (Buenos Aires: CEDES).
- Gupta, N. (2000) Sexual initiation and contraceptive use among adolescent women in northeast Brazil. *Studies in Family Planning*, 31, 228–238.

- Gupta, N. and Leite, I. C. (1999) Adolescent fertility behaviour: Trends and determinants in northeastern Brazil. *International Family Planning Perspectives*, 25, 125–130.
- Guzmán, J. M., Contreras, J. M. and Hakkert, R. (2001) La situación actual del embarazo y el aborto en la adolescencia en América Latina y el Caribe. In S. D. Burak (ed.) *Adolescencia y juventud en América Latina* (Cartago, Costa Rica: Libro Universitario Regional).
- Heilborn, M. L., Aquino, E. M. L., Bozon, M. and Knauth, D. R. (eds) (2006) *O aprendizado da sexualidade: Reprodução e trajetórias sociais de jovens brasileiros* (Rio de Janeiro: Fiocruz/Garamond).
- Jenkins, P. (1996) *Pedophiles and Priests. Anatomy of a contemporary crisis* (New York: Oxford University Press).
- Laumann, E. O., Gagnon, J. H., Michael, R. T. and Michaels, S. (1994) *The social organization of sexuality: Sexual practices in the United States* (Chicago: University of Chicago Press).
- Lenoir, R. (1989) Objet sociologique et problème social. In P. Champagne, L. Pinto, R. Lenoir and D. Merllié (eds) *Initiation à la pratique sociologique* (Paris: Dunod), pp. 63–105.
- Luker, K. (1996) *Dubious conceptions: The politics of teenage pregnancy* (Cambridge, MA: Harvard University Press).
- Magessi, M. (2006) Drama of drug-trade children: Food for thought. *O Globo*, 20 March, 16.
- Maia, C. (2004) O problema das favelas é a taxa de fertilidade. *O Globo*, 10 October, 18.
- Marques, T. and Medeiros, F. (2004) A decade of precocious maternity. *O Globo*, 21 December, 03.
- Palma, I. and Quilodrán, C. (1994) Respostas à gravidez entre adolescentes chilenas de estratos populares. In A. O. Costa and T. Amado (eds) *Alternativas escassas: Saúde, sexualidade e reprodução na América Latina* (São Paulo: Fundação Carlos Chagas/Ed. 34).
- Paiva, V., Ayres, R. J. and França Jr., I. (2004) Expanding the flexibility of normative patterns in youth sexuality and prevention programs. *Sexuality Research & Social Policy: Journal of NSRC*, 1, 1–13.
- Petry, S. (2001) Precocious pregnancy diminishes quality of life. *Folha de São Paulo*, 06 May, C5.
- Reis, A. O. A. (1993) *O discurso da saúde pública sobre a adolescente grávida: Avatares*. (Tese de Doutorado em Saúde Coletiva) (São Paulo: Faculdade de Saúde Pública/Universidade de São Paulo).
- Sabóia, A. L. (1998) Situação educacional dos jovens. *Jovens acontecendo na trilha das políticas públicas* (Brasília: CNPD), pp. 499–515.
- Serra, J. (1999) Child-mothers. *O Globo*, 15 August, 8.
- Souza, M. M. C. (1998) A maternidade nas mulheres como desvantagem social. In Associação Brasileira de Estudos Populacionais, *XI Encontro Nacional de Estudos Populacionais Annals* (Caxambu, Belo Horizonte: ABEP), pp. 1095–1117.
- Spira, A., Bajos, N. and et le Groupe ACSF (1993) *Les comportements sexuels en France* (Paris: La Documentation Française).
- Stern, C. and García, E. (1999) Hacia un nuevo enfoque en el campo del embarazo adolescente. *Reflexiones. Sexualidad, Salud y Reproducción*, 13, 1–21.
- Vieira, A. G. (2004) Voyage to the depths of Rio. *O Globo*, 4 October, 7.
- Vieira, A. G. (2005) Needy people multiply frighteningly. *O Globo*, 3 April, 7.

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