

# Risk Factors and Social Consequences of Early Pregnancy: A Systematic Review

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## Abstract

Early or teenage pregnancy is a worldwide phenomenon, considered both a social problem and a public health issue. This study analyzes the risk factors and consequences for the social development of young mothers based on a bibliographical review of research studies. A bibliographical search was conducted for studies published in Scopus and Dialnet between 2015 and 2022 that deal with the social aspects of teenage pregnancy rather than exclusively health-related issues. Two hundred twenty-seven articles were identified, and after a second review, 113 articles were selected. While rates of teenage pregnancy display divergences between geographic regions, the studies reveal common risk factors and consequences. Reproductive health programs should consider the problem from an intersectional perspective and, rather than relying exclusively on health-related policies, preventing early pregnancy requires comprehensive policies that incorporate cultural factors and seek out the underlying structural causes of inequality and poverty. This research is based on the results of the study *Analysis of Teenage Pregnancy from a Human Rights and Gender-based Perspective in El Salvador and Spain*, undertaken by the Medicus Mundi in collaboration with the El Salvador Intersectoral Alliance for Teenagers and Young Adults and the Ministry of Health of El Salvador.

## Plain language summary

### Risk and consequences of Early Pregnancy

This study analyses the risk factors and consequences for the social development of young mothers based on a review of research studies. To do so, a review of studies published in Scopus and Dialnet between 2015 and 2022 was conducted. A total of 227 articles were identified and, after a second review, 113 articles were selected. There are differences in teenage pregnancy rates between geographic regions. However, there are common risk factors and consequences. Reproductive health programmes need to consider the problem from an intersectional perspective and not just as a health problem. Preventing early pregnancy requires policies that incorporate cultural factors and address the structural causes of inequality and poverty.

## Keywords

early pregnancy, teenage mothers, bibliographical review, human rights, inequality, reproductive health

## Introduction

Adolescence is a crucial stage for personal development, during which major changes take place, not only at a physiological level but also psychologically and in terms of the development of the personality. It is the time of life when most time is invested in the training that will enable the person concerned to make the transition to adult life so that they can operate on an economically independent basis. This is the model as defined in ideal

terms. However, various significant events, often arising from a social structure that creates inequalities due to

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economic, gender-based, or cultural factors, can mean that the transition to adult life occurs in an abrupt and traumatic manner. This is true in the case of early or teenage pregnancy, a phenomenon affected by the structural inequalities that exist between social classes and the different regions of the world, and one that is considered both a social problem and a public health issue (Family Care International, 2008; Gayou-Esteva et al., 2020; Save the Children, 2016).

Teenage pregnancy is defined as “that which occurs within the first 2 years of gynecological age (i.e., the time that has passed since menarche) and/or when the teenage girl is still dependent on her original family nucleus” (Montenegro & Pacheco, 2010; quoted in Quintero & Rojas, 2015, pp. 224). The WHO uses the expression “early pregnancy” to refer to any pregnancy occurring before the age of 20 years. For its part, the United Nations defines teenage pregnancies as those in which the mothers are younger than 18 years of age (UNFPA, 2017). In all cases, it is not the age factor alone that needs to be highlighted but also the young woman’s stage of life and her ability to face the creation of a new life when, in many cases, she herself is dependent on a family nucleus or, as a result of her pregnancy, becomes dependent on a third person. This is the definition that we will apply in this study when using the expressions “teenage pregnancy” and/or “early pregnancy.”

The distinguishing feature of early or teenage pregnancy is that it occurs when the body of the girl or mother is not prepared for it and, therefore, represents a major risk of dying from factors related to pregnancy, childbirth, and post-childbirth, especially if the pregnancy occurs before the age of 15 (International Plan, 2023). It is estimated that complications arising from pregnancy and childbirth in young girls between 15 and 19 years of age are the second most prevalent cause of death worldwide for this population group (World Health Organization [WHO], 2023). Furthermore, in addition to the physical consequences, there are psychosocial consequences that will impact the future lives of the mother and her offspring.

This type of pregnancy is usually unplanned and unwanted. It is the product of various forms of violence—physical, symbolic, psychological, and economic—(Plan International, 2023) and has traumatic consequences for the life of the young women concerned. It represents a violation of a woman’s right to sexual and reproductive health, as established in Article 12 of Comment 22 of the International Covenant on Economic, Social, and Cultural Rights (United Nations, 2016):

The capability to reproduce and the freedom to make informed, free, and responsible decisions. It also includes access to a range of reproductive health information, goods,

facilities, and services to enable individuals to make informed, free, and responsible decisions about their reproductive behavior.

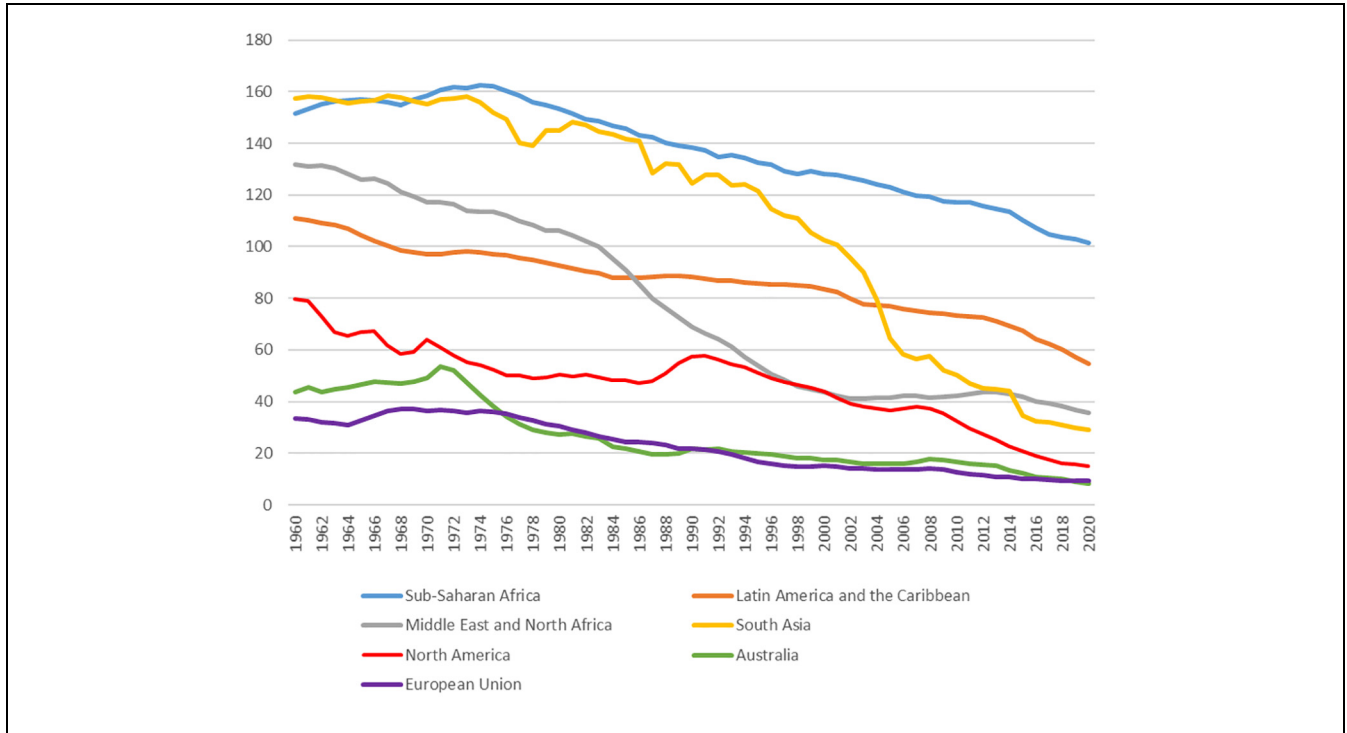
The guaranteeing of this right involves obligations for states to adopt policies and measures that are preventive, promotional, and corrective in all matters relating to sexual and reproductive health (Raya et al., 2022). As shown in the following section, at a worldwide level, it is estimated that 21 million teenage girls between the ages of 15 and 19 years became pregnant in medium-income and low-income countries in 2019 (World Health Organization [WHO], 2023). The highest rates are concentrated in African countries, followed by South America and Central America.

This article aims to analyze the current situation in relation to the issue of teenage pregnancy and its consequences for the various vital aspects of existence in terms of the development of the mothers, based on an international bibliographical review of empirical investigations into the issue. The results allowed the identification of early pregnancy risk factors and their consequences for the foremost vital aspects of human well-being: economic, health, educational, and occupational. The following section includes a statistical overview of the subject at a worldwide level. The second section describes the study methodology used for the investigation, and the third section outlines the principal results, identifying the risk factors and their consequences for each of the vital aspects of well-being. The aspects identified in the literature are presented in more detail in the discussion of other research works on the subject.

## Teenage Pregnancy: An International Perspective

This section presents statistical data showing the relevance of the issue on a global scale, highlighting the differences between the major regions of the world. As shown by Merino (2021) in a map based on WHO data, in some African countries, such as Niger, Liberia, Chad, the Central African Republic, Angola, Mozambique, and Madagascar, the rates exceed 150 children for every 1,000 women aged between 15 and 19 years. Rates on the same basis of between 100 and 150 are also concentrated in African countries: Senegal, Gambia, Côte d’Ivoire, Burkina Faso, Nigeria, Cameroon, the Democratic Republic of the Congo, Uganda, and Zambia. On the African continent, just four countries are statistically placed among the developed countries, with rates lower than 25 for every 1,000: Libya, Algeria, Tunisia, and Morocco.

South and Central America rank at an intermediate level, with most countries having rates of between 50 and 100 children for every 1,000 women aged between 15 and



**Graph 1.** Evolution of fertility rates per every 1,000 women around the world (1960–2020).  
 Source: own production based on data from the World Bank (2023).

19 years. For their part, Chile, Uruguay, and French Guiana have rates of between 25 and 50.

Syria, Iraq, Yemen, Afghanistan, Bangladesh, Laos, Cambodia, and Papua-New Guinea complete the list of countries with rates of between 100 and 150 for every 1,000 women aged between 15 and 19 years.

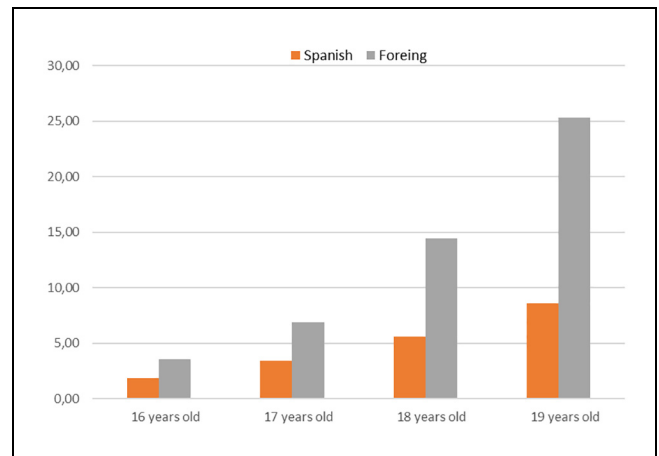
With regard to Europe, all countries are in a band with fewer than 25 children per every 1,000 women aged between 15 and 19 years, except for Slovakia, Romania, and Bulgaria, where the rates are between 25 and 50.

From a diachronic perspective, the following graph 1 illustrates the evolution of fertility rates among teenage girls in different regions of the planet:

The graph represents the fertility rate among teenage girls, that is, births per every 1,000 women aged between 15 and 19 years.

As can be observed, although the fertility rate has fallen over time in all the regions analyzed, there continues to be a considerable difference between the continents, with Sub-Saharan Africa, Latin America, and the Caribbean having the highest figures, while the European Union and Australia have the lowest percentages.

Nevertheless, the lower rates in developed countries should not conceal the reality of the existence of this type of pregnancy and its consequences for the teenage girls involved in these countries. In Spain, for example, the



**Graph 2.** Fertility rate of teenage girls aged between 15 and 19 years per every 1,000 inhabitants of this age group, in Spain.  
 Source: INE 2023.

birth rate for every 1,000 women aged between 15 and 19 years is estimated at 4.60, and the rate is higher among teenage girls of foreign nationality resident in Spain, as shown in the graph:

As illustrated in Graph 2, girls of foreign origin show a higher fertility rate in all age ranges. This difference is most notable among girls aged 18 and 19 years, who, in

the latter group, attain a rate of 24.5 for every thousand, compared with 8.2 for every thousand for girls who are Spanish citizens.

Together with the data for pregnancies, the figures for childbirth must also be taken into consideration: an estimated 12 million childbirths occur every year in developing countries, of which over 700,000 involve girls aged under 15 (Merino, 2021). This data also differs between the different regions and countries of the world. According to the WHO, the largest number of children born to girls aged between 15 and 19 years occurred in Sub-Saharan Africa, with 6,114,000 childbirths in 2021. In the same region, 332,000 of these children were born to girls aged between 10 and 14.

Behind the data lie the life stories of all the persons concerned. These include lives cut short by the high rate of maternal mortality on the one hand and, on the other hand, the consequences arising from the early pregnancies experienced. In terms of the statistics, it should be remembered that 95% of all maternal deaths are concentrated in medium-income or low-income countries (Say et al., 2014). This article analyzes the consequences of teenage pregnancy for personal development in relation to the various vital aspects of well-being considered in the studies dealing with social exclusion and inclusion (Alkire & Foster, 2011; Arndt et al., 2012; Hernández, 2008; Laparra, 2008; Raya, 2006; Silver, 2007; Subirats et al., 2004).

## Methodology

A bibliographic review of scientific studies dealing with the subject of teenage pregnancy published between 2015 and 2022 was carried out.

### Protocol

A specific protocol was developed for this review based on PRISMA-2020 (Page et al., 2021). This method was designed to help authors of systematic reviews transparently document their reasons for undertaking the review, their methods, and their findings. It includes a checklist of requirements that systematic reviews and meta-analyses of clinical trials must meet to present the information. It is a widely used method in health research that can also be applied to other research fields, such as the social sciences. This work attempts to answer the research question “*What are the causes and consequences of teenage pregnancy?*” by searching for papers that address the issue in databases focused on the social and health sciences, from which we extracted articles following the inclusion and exclusion criteria specified below.

### Criteria for Inclusion and Exclusion

The criteria for inclusion were: (a) articles about teenage pregnancy; (b) articles published between 2015 and 2022; (c) articles containing information about risk factors and/or the consequences of teenage pregnancy; (d) articles published in Spanish or English. The following were retained as criteria of exclusion: (a) studies that did not identify the risk factors of teenage pregnancy; (b) studies that focused on the increased medical risks during pregnancy due to age or those arising from childbirth in teenage mothers; (c) studies of unique cases; (d) very specific samples, for example, those linked to early pregnancy in persons with ADHD; and (e) those considered by the authors not to be relevant.

### Sources of Information

The search was conducted in the following electronic databases:

- Dialnet. One of the most important bibliographical portals for Spanish-language scientific literature. It focuses primarily on the humanitarian and legal fields, as well as social sciences.
- Scopus. A database of expert-selected quotations and abstracts combined with relevant peer-reviewed academic research literature.

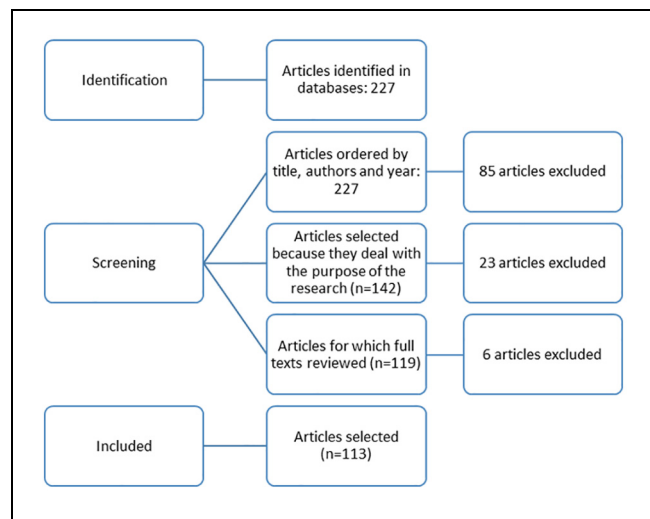
### Search Descriptors

In the searches conducted in the databases, the following descriptors were used: “pregnancy” and “teenage” with the Boolean operator AND to find documents that dealt with “impact” or “factor.”

### Selection of Publications

Four researchers undertook the process of selecting the publications. Firstly, the lead researcher explained the criteria for the inclusion and exclusion of articles; secondly, the articles were divided in such a way that each researcher could read a part of the articles and complete a table indicating the year, country, age of the sample, whether or not it was a study, whether or not it was a bibliographical review, whether it contained risk factors, and also indicate the specific contributions that the article made in terms of the risk factors and consequences associated with teenage pregnancy. Thirdly, the four researchers jointly analyzed the information gathered from the articles and selected those that met the criteria for inclusion.

A total of 227 articles were identified. After reading their titles and abstracts, 85 articles were excluded



**Figure 1.** Process of selecting the bibliography analyzed. Source. Own production.

because they did not meet the objectives of the review. After reading the full texts of the publications, 23 articles were excluded because they did not comply with the inclusion criteria. During the reading process, a further six articles were eliminated because they did not include content relevant to the research and/or were not clearly linked to the inclusion criteria. Finally, 113 articles were selected, as shown in the following Figure 1:

**Data Analysis**

The selected articles have been tabulated using the Excel program, indicating the year, country, author, title, and, from the point of view of content, the risk factors and consequences in relation to the areas of health, education, economic situation, and employment. After reading the texts, the research team held three meetings to discuss the results obtained. These results were subsequently contrasted with other studies on the topic that had not emerged in the initial search.

**Results**

This section presents, firstly, the characteristics of the articles analyzed in terms of their geographical location, publication period, type of work, and database. Secondly, the risk factors related to teenage pregnancy and their consequences are outlined (view Table 1).

Most of the articles analyzed are based on studies that use qualitative, quantitative, or mixed research techniques, with 78.76% representativeness. The remaining texts are bibliographical reviews (21.24%) of interest for the object of the study in question. The databases used

**Table 1.** Characteristics of the Articles Analyzed.

Geographical location	n°	%
Africa	13	11.50
America	81	71.68
Asia	4	3.54
Europe	7	6.19
Various	8	7.08
<b>Total</b>	<b>113</b>	<b>100.00</b>
Publication period		
2015–2016	44	38.94
2017–2018	23	20.35
2019–2020	39	34.51
2021–2022	7	6.19
<b>Total</b>	<b>113</b>	<b>100.00</b>
Type or work		
Study	89	78.76
Literature review	24	21.24
<b>Total</b>	<b>113</b>	<b>100.00</b>
Database		
Dialnet	42	37.17
Scopus	71	62.83
<b>Total</b>	<b>113</b>	<b>100.00</b>

Source. Own production.

were, firstly, Scopus (62.83%) and, secondly, Dialnet (37.17%). As for the time of publication, the articles were divided into 2-year periods, with 38.94% of them being published between 2015 and 2016, 20.35% from 2017 to 2018, 34.51% from 2019 to 2020, and a minority, 6.19%, dating from the last years analyzed, between 2021 and 2022.

Geographically, by continent, the majority of the articles analyzed come from America (71.68%), with the United States and Mexico accounting for 27% and 15%, respectively. In second place are texts from countries on the African continent (11.5%), with research from Ghana, Nigeria, South Africa, Uganda, and Ethiopia, among others. Europe accounts for 6.19% of the articles, primarily originating in Spain, Italy, and the United Kingdom. Asia is represented to a lesser extent, with 3.54%. It is also interesting to note that there are articles in which comparative studies were carried out between countries on different continents; these texts represent 7.08% of all the articles analyzed. Based on the bibliographical review, the results present the risk factors and their consequences for personal development in terms of each of the vital aspects of well-being linked to the issue of social inclusion. Half of the texts analyze aspects related to health (51.335%), followed by education (40.71%); the employment aspect appears in almost a third of the texts (28.32%) and, finally, the economic aspect is present in a quarter of the texts (24.78%). The following Box 1 summarizes the aspects highlighted for each of the vital areas related to well-being:

In general, the texts address one of the dimensions analyzed, although the risk factors in one dimension may have repercussions in others. Furthermore, the consequences of teenage pregnancy may be determined by the sum of different risk factors. In the following section, the aspects identified in the literature are presented in more detail along with some of the other research on the topic.

## Discussion of the Results

The results obtained in the review have made it possible to identify risk factors and consequences for teenage mothers. These aspects have also been analyzed in other research, which provides a broader perspective on the topic.

Several studies on health and early pregnancies focus their attention on one of a range of associated aspects. One such study postulates low self-esteem in affectionate relationships as a risk factor for teenage pregnancy (Dávila Ramírez et al., 2016). Elsewhere, a link has been found with mental instability; either in the young mothers concerned (Laursen et al., 2022; Hua et al., 2021) or previous mental health problems in close family members (Copeland, 2017; Martínez et al., 2017); a relationship between drug consumption and teenage pregnancy has also been established (Recio, 2019).

In any case, from a health viewpoint, the causes of early pregnancy are varied. They may be related to limited access to health systems (Mkwanzani, 2017), limited access to methods of contraception (Ponce et al., 2018; Urindwanayo & Richter, 2020), or to ignorance of the use of the said methods of contraception (Gogna & Binstock, 2017). Various studies show that a lack of reproductive health and sexual education are two factors directly related to risk in terms of early pregnancy, irrespective of the context or territory under study (Araúz-Ledezma et al., 2020; Chung et al., 2018; Hernández & Gentile, 2015; Manaseri et al., 2019; Masten et al., 2021; Murphy-Graham et al., 2020; Lowrey et al., 2021; Mintogbé et al., 2021). It is an observable fact that there are studies focusing on the misinformation linked to early pregnancy (Rodríguez et al., 2018), the lack of access to the necessary information (Urindwanayo & Richter, 2020), and inadequate use of contraceptive methods (Gogna & Binstock, 2017; Medina et al., 2019; Navarro Ramírez et al., 2019; Recio, 2019). Whatever the case may be, this misinformation about sexual and reproductive education may lead to a rejection of the use of contraceptive methods, such as, the use of condoms by boys or hormonal contraceptives by girls due to effects such as weight gain, among others (Masten et al., 2021). In all cases, the consequences of misinformation lead to a greater risk of early pregnancy.

Teenage pregnancy has consequences for the physical health of both the mother and the fetus. Studies allude

### Box 1. Risk Factors for Teenage Pregnancy and the Main Associated Consequences.

Risk factors	Consequences
<b>Health</b>	
Low self-esteem	Physical and sexual abuse
Consumption of drugs	Risk of contagion from sexually transmitted diseases
Mental disorders in the girl and/or her family	Lack of access to methods of contraception
Abusive consumption of alcohol	Risks arising from pregnancy and/or childbirth
Ignorance of methods of contraception and lack of access to contraception	
Limited access to health systems	
<b>Education</b>	
Low educational level	Little or no sexual and reproductive health education
Lack of interest in education	Ignorance of the complications of teenage pregnancy
Lack of money to access education	
Low educational expectations	
<b>Employment</b>	
Precarious working conditions of parents with long working hours	Less care and attention
Districts with high unemployment rates	Accumulation of factors of vulnerability and marginalization
Households with unstable employment	Precarious access to the labor market
Lack of qualifications	
<b>Economic situation</b>	
Low economic level	Exchanging sex for food or medicine
Households living in poverty	Early marriages
Districts with high poverty rates	Forced marriages
Marginalized districts	Early school leaving
Economic dependence	Vulnerability and economic dependency

Source. Own production, based on the bibliography consulted.

to various problems during childbirth, premature births, the birth of underweight babies, and the psychological consequences for the mother (Dávila-Ramírez et al., 2016; Florescu et al., 2016; Moisan et al., 2016). Other topics include a greater risk of infant morbidity and mortality (Mintogbé et al., 2021) together with the risk of mortality among the young mothers (Burke et al., 2018) due to possible deaths in childbirth or death or health complications arising from obstetric and perinatal causes

(García Hermida & Lucero Arcos, 2019; Medina et al., 2019; Robaina Castillo et al., 2019). It goes beyond the objectives of this study to identify the consequences of early pregnancy for the health of both mother and baby, which have been analyzed in depth in other studies (e.g., DeMarco et al., 2021; Karacam et al., 2021).

In addition to the problems identified above, from a health viewpoint, it should also be noted that early pregnancy increases the risk of suffering physical and sexual abuse. Early exposure to unprotected sexual relations using barrier methods subjects teenage girls to a risk of contagion from sexually transmitted diseases (Song & Qian, 2020; Sturgill et al., 2021), such as chlamydia (Kozhimannil et al., 2015) and HIV (Austrian et al., 2019), among others.

In the educational field, numerous risk factors are apparent, such as low educational expectations (Makiwane et al., 2018), lack of interest or money with a view to accessing education (McDade et al., 2020), and the low educational level of the teenagers concerned (Austrian et al., 2019; Makiwane et al., 2018; Moisan et al., 2016).

Early pregnancy is related to early school leaving (González Nava et al., 2020; Murphy-Graham et al., 2020; Villalobos-Hernández et al., 2015; UNFPA, 2020), leading to limited future employment opportunities (Vélez & Figueredo, 2015). This explains the importance of policies and programs to encourage subjects to return to school (Zuilkowski et al., 2019).

The occupational aspect appears in the bibliographical review from a dual perspective, considering, on the one hand, the general employment situation in the teenagers' households and, on the other, the participation in the labor market of the teenage mothers themselves. With regard to the general situation of the household, a study undertaken in Venezuela and Colombia points to a relationship between districts with high rates of unemployment and high rates of teenage pregnancy (Cuberos de Quintero et al., 2019). In addition, precarious working conditions in households, associated with long working hours, imply less opportunity for parents to look after their children (Mintogbé et al., 2021) and less control over possible risk-factor conduct. A study undertaken in Spain involving the participation of 583 young people between the ages of 14 and 24 years highlights the greater risk of unplanned pregnancy when a parent is in an unstable employment situation (Yago Simon & Tomas Aznar, 2014). This situation may be further exacerbated in single-parent households when a shortage of income needs to be compensated for by more intensive working hours (Trinidad-Noguera et al., 2015) and, consequently, by long periods without parental supervision.

With regard to access to employment, early pregnancy restricts teenage mothers' availability to participate in the labor market (Humberstone, 2018). Studies identify this greater difficulty in accessing the labor market (Carrillo Soto & Manzanero, 2018; García Hermida & Lucero Arcos, 2019; Póo et al., 2018); less favorable working conditions (Fasula et al., 2019; Florescu et al., 2016) and lower incomes (Fasula et al., 2019; Moisan et al., 2016). In general, it can be stated that teenage mothers' access to the labor market is slow and, when it finally happens, is characterized by precarious employment (UNFPA, 2020; Yago-Simon, 2015). Consequently, the teenage mother is destined for a circle of poverty, vulnerability, and exclusion.

The economic aspect is analyzed in the bibliography as a constant that relates low levels of income and poverty with pregnancy in teenage girls (Estrada et al., 2017; Hall et al., 2019; Mkwanzani, 2017; Moisan et al., 2016; Robaina-Castillo et al., 2019; Villalobos et al., 2021). Various studies identify the fact that subject individuals originate from social groups with limited economic resources (Scannapieco & Connell-Carrick, 2016; Vélez & Figueredo, 2015), come from households living in poverty (Griese et al., 2016; Langley, 2016; Makiwane et al., 2018; Murphy-Graham et al., 2020; Olakunde, 2019; Scannapieco & Connell-Carrick, 2016; Van Zyl et al., 2015), or live in areas with poverty rates above the national average (Masten et al., 2021) and/or in marginal neighborhoods with high poverty rates (Cuberos de Quintero et al., 2019; Willie et al., 2016) as risk factors for pregnancy at an early age.

Households with low-income levels were identified in various studies (Chung et al., 2018; Copeland, 2017; Lang et al., 2013; Laursen et al., 2022; Loll et al., 2021; Martinez et al., 2018; Mintogbé et al., 2021; Santelli et al., 2015), with this factor leading to situations such as exchanging sex for food or medicine (e.g., Austrian et al., 2019) or being forced to marry early or abandon their studies (e.g., Psaki, 2016). All of which make teenage girls more susceptible to early pregnancies.

Furthermore, situations of economic dependency and a lack of independent means (Basilio, 2016), as either a cause or a consequence of the pregnancy, put teenage mothers at risk of falling into abusive or unprotected relationships.

From an economic viewpoint, pregnancy at an early age is also related to the repetition of a pattern of poverty (García Hermida & Lucero Arcos, 2019) and the impact that has on a family's economic level (Bonilla et al., 2018; Florescu et al., 2016; Smith et al., 2016). Moreover, when the pregnancy occurs outside a stable relationship and the father does not assume responsibility for maintaining and/or bringing up the baby, it is

related to an additional economic burden on young mothers (Hernández & Gentile, 2015).

An unplanned pregnancy is related to young women's gender assumptions (Yago-Simon, 2015) and also to traditional values in terms of sexuality (UNFPA, 2020). In addition to the above, the environment surrounding the young woman, such as her family (Ezer et al., 2016; Gayou-Esteva et al., 2020) and peer group (Carvajal Barona et al., 2017; Cordero, 2018; Ezer et al., 2016), together with the cultural beliefs that they uphold, may impede her access to family planning systems (Makiwane et al., 2018). In this sense, perceived social standards (Carvajal Barona et al., 2017; Simón, 2016) and religious beliefs (Fasula et al., 2019; Mintogbé et al., 2021) can also be a factor in early pregnancy. The latter aspect refers to the attitude taken by the religion practiced in the surrounding environment toward the use of contraceptives or voluntary interruptions of pregnancy (Ezer et al., 2016). By way of example, in a study undertaken in Nigeria, it was observed that 53.4% of the pregnant teenagers under study felt that their parents viewed their pregnancy as a divine blessing (Salami & Ayegboyan, 2015). Cultural factors such as those identified above have led to early pregnancy being linked to minority cultures (Burrow-Sánchez & Florsheim, 2017; Tsai et al., 2017) or certain specific ethnic groups (Ezer et al., 2016), precisely as a result of the cultural values upheld in such societies.

In connection with the above, it is important to bear in mind that living in environments characterized by male chauvinism (Austrian et al., 2019; Thimeos & Eliana, 2015), violence (Díaz-Sánchez et al., 2021; Laursen et al., 2022) or a lack of opportunities (Masten et al., 2021; Urindwanayo & Richter, 2020) is conducive to early pregnancy. Furthermore, as shown by Aparicio et al. (2019), physical and sexual abuse continue to be significant predictors of at-risk sexual conduct. The above-mentioned authors also indicate that sexual abuse continues to be a significant predictor of teenage maternity when alternative explanatory variables are checked. For this reason, the most sexist societies (Alvarado Thimeos, 2015; Austrian et al., 2019), in which traditional gender roles and stereotypes are perpetuated, may inculcate a predisposition to teenage pregnancy (Gayou-Esteva et al., 2020).

In addition to the aspects mentioned above, the residential aspect must also consider the differing rates of early pregnancy in each country or region of the world, as previously shown. Early pregnancy is most prevalent in regions suffering from low economic resources and poverty (Decker et al., 2018; Rosenbaum et al., 2016). Some studies highlight overcrowding in households as a risk factor that may lead to the early initiation of sexual activity (Vélez & Figueredo, 2015) and possible early

pregnancies. It has also been observed that there is a larger number of forced marriages and/or marital couples forming at an early age in certain countries, such as India and Bangladesh, among others (Florescu et al., 2016; Psaki, 2016; Rashid & Mwale, 2016).

Other studies emphasize the association of teenage pregnancy with rural areas (Arnold et al., 2000; Santelli et al., 2015) or even with a lack of means of transport to attend health centers in areas where the latter are located a considerable distance from subjects' places of residence (Masten et al., 2021). These factors are not only associated with a lack of access to information about sexual and reproductive health but also with difficulty in accessing both contraceptive methods and the necessary medical attention during pregnancy, childbirth, and the postpartum period.

The analysis of risk factors from a relational perspective is an approach that received the least attention among the studies reviewed. It is nevertheless clear that the support and accompaniment given to teenage girls is vital for understanding the phenomenon of early pregnancy. In this sense, some studies revealed a higher risk of teenage pregnancy among girls with little social support (Copeland, 2017), an absence of positive stereotypes, whether among adults or their peers (Tanner et al., 2015), or with little or no relationship with their family and/or parents (Mintogbé et al., 2021).

In relation to the above, and combining relational, educational, and cultural factors, is the role played by the family in the assessment and/or prevention of early pregnancy (De la Rubia & Torteya, 2017). Various studies refer to the importance of communication around sexuality in families (Estrada et al., 2017; Griese et al., 2016; Martinez & Orpinas, 2016; Tsai et al., 2017). As a specific example, in one of the studies conducted on this subject in Portugal and Brazil, the failure on the part of the family to provide information about sex and contraception was one of the factors most closely linked to the phenomenon of early pregnancy (Canavarro et al., 2020). This aspect also arises in the study conducted by Margherita et al. (2017), which identified an insufficient transmission of narratives describing the experience of early pregnancy between teenage girls and their mothers who had also fallen pregnant at an early age.

Another relevant issue is the availability of support for dealing with this new stage in life if the pregnancy comes to fruition and if, after childbirth, the young mother must face the challenge of bringing up the infant. This situation places the teenage mother in a position of great vulnerability and dependency on third parties and often affects girls who are forced to marry a man who is much older than them (Florescu et al., 2016; Psaki, 2016; Rashid & Mwale, 2016) or who are more vulnerable to sexual abuse. The link between child abuse and teenage



pregnancy has been established by several studies, which have demonstrated that teenagers who have themselves undergone sexual abuse are more inclined to get involved in risky situations—including those that put them at risk of sexual abuse—than those who have not suffered in this way.

Child maltreatment and sexual abuse are often present in the biographies of teenage mothers (Pimentel et al., 2020). A study of 499 teenage mothers in Colombia found that 66.7% of them had been victims of rape (Restrepo Martinez et al., 2017). For its part, the study undertaken by Gray et al. (2016) on a sample of 188 Afro-American girls aged between 13 and 17 years showed that those who had undergone pregnancies were likelier to have histories of physical abuse. In many cases, the pregnancy itself was the consequence of violent sexual relations perpetrated by persons from the teenager's immediate environment (Harner, 2005; Aparicio et al., 2019). The study undertaken by Noll et al. (2019) indicates that sexual and physical abuse continue to be significant predictors of risky sexual conduct and that sexual abuse continues to be a significant predictor of teenage pregnancy. In these situations, the girl is caught up in a network of a lack of protection (Escobar et al., 2019). There were even paradoxical situations in which teenagers were subject to a vulnerable situation away from the protection of their entourage (Lurgain & Eyber, 2022) as well as being victims of denigrating, degrading, or abusive treatment by people within their entourage. However, when pregnant teenagers benefit from family support, the feeling of having the effective capacity and resources to deal with the process of pregnancy increases (Lapeira-Panneflex et al., 2019). Crucial to this process is a successful negotiation and transition toward the new roles of parenthood and grandparenthood resulting from the teenage pregnancy (Merriwether-de Vries et al., 1996). Another factor that improves results for pregnant teenagers is access to social support (Humberstone, 2018), both at an educational level and in terms of social participation.

## Conclusions

This research has allowed us to identify a series of risk factors related to early pregnancy and their consequences for the social development of teenage and other young mothers. At the same time, it was observed that these aspects have been evidenced in numerous research studies undertaken in different regions of the world, allowing the identification of a common denominator among the causes and consequences involved in the problem (Crooks et al., 2022; Folayan et al., 2015; Martínez et al., 2017; Sámano et al., 2017). As observed in the bibliographical review, there are many factors linked to the risk of

teenage pregnancy. In line with other studies (Favara et al., 2020; Perea et al., 2018; Soto et al., 2018), the analysis undertaken shows the multi-faceted nature of the problem and its repercussions, in addition to the inter-relationship between these risk factors and their impact on the life stories of teenage mothers. These consequences increase both the social vulnerability of the young women concerned (Cook et al., 2015) and female poverty (Gayou-Esteva et al., 2020). Early pregnancy often leads to early school leaving and impedes the young woman's future economic prospects (Hofferth et al., 2001; Manlove & Lantos, 2018; Vélez & Figueiredo, 2015). In addition, since a significant proportion of pregnant teenagers originate from poor households, it generates a cycle of poverty (Garwood et al., 2015; Gayou-Esteva et al., 2020). Furthermore, the circumstances described above are further exacerbated by the stigma and stereotypes that are often attributed to these young women as a consequence of falling pregnant at such an early age (Jones et al., 2019).

Although research studies from different geographical regions emerged in the bibliographical review, it should be noted that the search for information was restricted to studies published in indexed journals. Therefore, other research studies and analyses are denied visibility. For this reason, the research should ideally be extended to include comparative studies of different world regions from perspectives rooted in the reality of each environment. Another element to bear in mind, from a standpoint more focused on the cultural aspect, is the context of the girls concerned (Cancino & Valencia, 2015; Hernández & Perdomo, 2017; Mora-Cancino & Hernández, 2015). Cultural factors play a key role in the acceptance of early pregnancy (Akella & Jordan, 2014; Henry et al., 2015), and some cultural environments still consider pregnancies of this kind to be normal and even expected (Lagarde, 2015; Gayou-Esteva et al., 2020); moreover, since “the initial age limit is variable and relative: what is normalcy for one social group means early pregnancy for another” (Lagarde, 2015; quoted in Gayou-Esteva et al., 2020, p.3).

The results obtained in this work allow for the extraction of different lines of action in terms of public policy, social intervention, and research. Among these, the research team considers the following to be priorities.

In regard to public policy and in line with the recommendations of international organizations (OMS & UNFPA, 2012), early and teenage pregnancies should be considered a violation of human rights and, therefore, it is incumbent upon national governments to deploy an array of public policies to protect the young and teenage girls concerned. Alongside to health policies designed to ensure sexual and reproductive health, regulations are required to eliminate early and forced marriages where

they continue to be practiced (Blum & Gates, 2015). In addition, educational policies are needed to prevent early school leaving, and co-educational policies are needed to disclose sexist practices and generate a relationship model between men and women based on equality (Jaramillo, 2017; Sanz-Martos et al. 2019; UNICEF, 2015). From an economic viewpoint, policies are required to reduce the gaps created by social and gender-based inequalities. In summary, public policies, including those relating to occupational and residential aspects, must be guided by a social orientation (Azevedo et al., 2012).

From the perspective of social intervention, dealing with teenage pregnancy requires the development of solutions that are not merely welfare-based but also preventive in nature (Sanz-Martos et al., 2019). Education and awareness-raising programs must be designed from a gender perspective in order to examine the structural roots of inequality between men and women that lead to situations of abuse, aggression and violation of women's bodies. Within the framework of each specific cultural context, action plans must adopt a holistic approach based on the realization that all the factors involved are interrelated (Colomer Revuelta, 2013). Early pregnancy is more than a health issue; it also affects vital aspects of the individual's personal development, hence the importance of reinforcing educational programs to prevent school abandonment, as the need for employment programs that can help young mothers enter the labor market, and the need for economic programs that guarantee autonomy and economic independence (OPS, UNFPA, UNICEF, 2018).

This type of approach would make it possible to analyze the diverse existing realities, both in terms of the situations observed within the context that produces them and the life stories of those who experience them. Early or teenage pregnancy is a worldwide phenomenon that occurs most frequently in medium-income and low-income countries (Chung et al., 2018). Nevertheless, with different causes, it also occurs in high-income countries (Tamim, 2014). Over and above the statistics expressed in terms of rates, the life stories of teenage mothers differ from country to country and in accordance with their social class, residential environment, and privileges (or lack thereof). Furthermore, cultural, ethnic, religious, and territorial aspects have differing impacts on the reality experienced and the methods of dealing with that reality. At the same time, the diversity of national policies, preventive practices, and assistance provided must also be considered. Dealing with this problem is not only the responsibility of the teenage mothers concerned but also a public responsibility that deserves priority treatment.

### Author Contributions

This research is a result of the study *Analysis of teenage pregnancy from a human rights and gender-based perspective in El Salvador and Spain* undertaken by the Medicus Mundi in collaboration with the El Salvador Intersectoral Alliance for Teenagers and Young Adults and the Ministry of Health of El Salvador.


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### Data Availability Statement

Data sharing not applicable to this article as no datasets were generated or analyzed during the current study.

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