

# Paternity in youth trajectories: a contribution to the debate on “teenage pregnancy”

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## Sexuality, culture and politics A South American reader

Although mature and vibrant, Latin American scholarship on sexuality still remains largely invisible to a global readership. In this collection of articles translated from Portuguese and Spanish, South American scholars explore the values, practices, knowledge, moralities and politics of sexuality in a variety of local contexts. While conventionally read as an intellectual legacy of Modernity, Latin American social thinking and research has in fact brought singular forms of engagement with, and new ways of looking at, political processes. Contributors to this reader have produced fresh and situated understandings of the relations between gender, sexuality, culture and society across the region. Topics in this volume include sexual politics and rights, sexual identities and communities, eroticism, pornography and sexual consumerism, sexual health and well-being, intersectional approaches to sexual cultures and behavior, sexual knowledge, and sexuality research methodologies in Latin America.

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## Paternity in youth trajectories: a contribution to the debate on “teenage pregnancy”\*

Cristiane S. Cabral\*\*

This article is about youth sexuality and reproduction from a male perspective. I discuss to what degree youth paternity is one of the possible ways for poor young men to transition into adulthood. I also address the logic that underlies the management of contraception and its implications in cases of pregnancy. The considerations presented here originated in ethnographic research carried out among the residents of a *favela*<sup>1</sup> in Rio de Janeiro who were between 18 and 24 years old and who had children before the age of 20.<sup>2</sup>

In discussing teenage pregnancy (TP) from a male point of view, I seek to contribute to the current debate regarding this phenomenon. Traditionally, studies of reproduction and contraception have been limited to the female population. However, including men as well as women in the analysis of these issues allows us to unravel a multifaceted universe present in a diversity of situations. This perspective leads us to discuss the cultural constraints interwoven into young men and women’s use of contraception.

In this study, youth is not defined as an age category: instead, adolescence and youth are seen as a process. I argue that there are different ways of transitioning into adult life. Recent works have emphasized the social process involved in this transition, largely characterized by four milestones: finishing one’s studies, starting a professional life, leaving one’s parents’ home and beginning conjugal life (Galland, 1997). These events are experienced in different ways and make up different forms of transitioning into adult life, especially when the high social and regional inequalities that exist in Brazil are taken into consideration.

Youth is therefore understood here as a socially constructed category, encompassing not only similarities but also differences among young people. In this view, an arbitrary division between age groups classifies and imposes an order upon the social world through categories such as childhood, youth, adult life and old age, which do not

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<sup>1</sup> Translator’s note: a slum or shanty town.

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correspond to homogeneous groups (Ariès, 1981). The approach I thus adopted is consistent with an emphasis on the heterogeneous and diversified character of youth, retaining the specificities of gender, class and ethnicity (Bourdieu, 1983; Pais, 1993; Casal, 1999).

## Demographic transition and the diminution of reproductionage in Brazil

Youth and reproduction are issues on the political agenda in Brazil due to recent and heated debates about “early pregnancy” or “adolescent pregnancy”. Defined by the World Health Organization (WHO, 2001) as pregnancy taking place between the ages of 10 and 19 years, teenage pregnancy has been framed as a “social problem” and a “public health problem”. The qualifiers “early” and “unwanted” are often employed when characterizing the phenomenon, which is frequently portrayed as a detour or an inconvenience in the youth’s life. The bibliography regarding the theme defends that public policies should be based on strategies to “prevent” or “curb” “early” pregnancy, based on “bio-psycho-social risks” for the mother as well as for her offspring (Santos Júnior, 1999).

The uneasiness regarding TP in Brazil can be traced back to the country’s demographic transition, among other things. In the last decades, Brazilian population has gone through rapid transformations in terms of age structure due to a decrease in fertility and an increase in life expectancy at birth. The growth rate of the young population has decelerated, while growth rates of the older population have risen (Baeninger, 1999).

In the last 40 years, we have witnessed a strong demographic transformation in the field of reproduction, with a sharp decline in fertility rates, first in states located in the Brazilian Center-South, and, twenty years later, in the less socially and economically developed areas such as the Northern and Northeastern states (Simões, 2006). The total fertility rate (TFR) for Brazil, according to the Brazilian Census Bureau, was 5.76 children per woman in 1970 and 2.38 in 2000. There are strong regional differences, however. In the Brazilian Southeast, the TFR was below the national average, corresponding to 4.56 children per woman in 1970 and 2.1 in 2000; in the Northeast, the rates were of 7.53 and 2.68, respectively.<sup>3</sup> The decline in the TFR is strongly related to urbanization processes, to cultural changes that interfere with the regulation of fertility and to the diffusion and use of contraceptive methods, including sterilization (Berquó, 1993; 1999; Martine, 1989). These trends are radically different according to the woman’s age group and years of formal education (Simões, 2006).

<sup>3</sup> Recent data from the 2006 PNDS show that Brazil has a TFR below replacement levels, with 1.8 children per woman (MS, 2008). Regional TFR differences have suffered further reductions: North (2.3), Northeast (1.8), Southeast (1.7), South (1.7), Center-West (2.0).

Traditionally, higher fertility rates (age-specific fertility rates) were present among women between 25 and 29 years of age and between 30 and 34 years of age, configuring what is commonly referred to as a late fertility pattern. From the 1980s onward, we’ve observed a relative growth in the fertility rates of women aged 15 to 19 years, a fact that becomes more relevant when compared to the concurrent decrease in the rates of other age groups (Camarano, 1998; Berquó, Cavenaghi, 2005). This dislocation is responsible for a typically young pattern in the fertility structure of age groups in Brazil, which is unlike the fertility profile of developed nations. Despite the fact that the increase in fertility among women aged 15 to 19 years is not statistically significant and that it is “no more than the effect of profound reductions in the participation of older women’s fertility in overall fertility” (Simões, 2006, 93), this trend is frequently used to paint a picture of an TP epidemic, which affects, above all, the poorer segments of the population. This is the prevailing tone of the public debate on the issue, recurrently associated with the issues of poverty and urban violence in Brazil (Oliveira, 2005; Vieira, 2005; BombaRelógio, 2005; Heilborn, Brandão, Cabral, 2007).

## The universe under investigation

My investigation is based on individual interviews and observations of the contexts of sociability of young men living in a *favela* in Rio de Janeiro (Brazil) who had become fathers by the age of 20. I conducted 15 interviews with 18 to 24 year-old men and 14 interviews with the mothers of young fathers, based on the assumption that the consequences of TP reach beyond the individual (the actors/parents), into their networks of relationships.

The adoption of the WHO’s age criterion in my interviews allows me to compare my data with other studies on TP. Moving the age group beyond the “official” limits of adolescence is also a methodological strategy that allows for a retrospective construction of biographical trajectories and the evaluation of events and their consequences.

My fieldwork was carried out through “social or friendship networks” (Pais, 1999), which are crucial in constructing a network. Although they were all residents of the same neighborhood, my informants have similarities and differences in their individual biographies and family histories. Among the 15 informants, there were 23 cases of TP, excluding cases of abortion (some had a second or even third child before the age of 20). The ages at which these men had their first child vary between 15 and 19 years; their partners are younger in most cases and had their first child between the ages of 12 and 19 years. The stories include planned and unwanted pregnancies, attempted abortions, radical opposition to abortion, diverse conjugal arrangements, successful unions, separations, varying degrees of family support, social recognition and rejection of paternity, acknowledgment of the child but not the partner, paternity as an incentive to enter into crime or as an “antidote to anomie” (Vilar and Gaspar, 1999).

The diversity of situations found in the ethnographic universe under study is indicative of the need for the relativization of the main arguments presented in the hegemonic literature on TP. This production, originating largely in the health field, portrays the phenomenon through homogenizing conceptions that emphasize TP's negative impacts, ignoring gender and class differences. However, despite this heterogeneity, in several cases, paternity is at least acknowledged. Given the nature of the object and the methodologies employed, choice of informants was based on the existence of a child. Therefore, it is possible that the methodological strategy employed enables a greater access to cases of acknowledged paternity than to conflictive pregnancy situations—unacknowledged paternity, abortion or TPs that were unknown to the young father. The analysis of the empirical material shows homogeneity both with regards to the literature on poorer families segments and the literature on masculinities, signaling a certain model for male trajectories among poorer populations.

## Study and work trajectories: homogeneities and singularities

In order to better understand the informants' biographies/trajectories, it is necessary to describe their families of origin. The informants' parents had low educational levels: none reached high school and few completed basic education (frequently, this educational level was attained during adulthood, in night schools known as “*supletivos*” and simultaneous with their children's schooling). Some parents “never attended school” and are illiterate. This low educational level directly impacts the type of jobs they attain, which are also precarious: several are unemployed. Although some of the parents are formally employed, the vast majority carries out activities that are characteristic of the informal job market. Faced with unemployment, they resort to odd jobs, usually in the neighborhood where they live. The mothers mostly have no profession, nor do they have paid jobs; according to the informants, they are “housewives”. Some mothers engage in temporary activities, odd jobs such as washing clothes or working as cleaning ladies, in order to help the main breadwinner (Salem, 1981; Duarte, 1986; Sarti, 1996).

Like their parents, my young male informants have precarious levels of education and job placement: only two are still studying. The others are no longer in the educational system, having parted with one of the main expectations they faced during adolescence and youth (education) as a phase of preparation for adult life. The informants “leave school” between the ages of 14 and 18, when they are still in basic education (6<sup>th</sup> to 9<sup>th</sup> grade). The search for a job was a recurring reason for interrupting their studies (7 cases). Four informants claimed it was impossible to continue studying due to their partner's pregnancy. Three informants claimed there was incompatibility with and/or a lack of interest in their studies. All referred to being held back multiple times at school.

Informants' work activities are characteristic of the informal job market. They cite odd jobs, mostly as bricklayer's assistants, wall painters and similar occupations. In fact, this

type of informal, temporary job placement was the highest level many had attained. Few managed to find “steady employment”, with some type of contract or the highly desired “job with a signed *carteira de trabalho*”.<sup>4</sup> Unemployment is a reality for nearly half of the informants.

Difficulties in school contribute to a greater weight of an “instrumental orientation” (Pais, 1998) towards work. We can gather from the statements that a certain search for financial autonomy exists in relation to the parents and with regards to possibilities for consuming material goods. Work is perceived as a relevant moral universe in the trajectories of these young men, besides being an important element in the construction of their male identity. Projects of autonomization and consumption are made possible by work, which leads these youths to leave school even in the absence of a pregnancy event. This is an argument dear to the literature on TP which considers the interruption of education because of a pregnancy as a strong harmful effect on youth trajectories. However, it can be said that for the poor young men in my study, a pregnancy intensified existing difficulties and/or lack of interest toward school, which makes returning to and/or finishing school exceedingly difficult or even impossible.

## A traditional reproductive pattern

Another hypothesis present in the literature on TP concerns the repetition of reproductive patterns across generations. Thus, the youths’ parents would themselves have been “adolescent parents”. I will therefore describe my informants’ families of origin.

A large number of my informants come from nuclear families, a pattern that is still dominant in Brazilian society. Domestic units are mostly made up of parents and children; the average is three children per couple, varying from one to eight children per couple. There are also reconstituted families, a result of separations and new unions. However, the domestic arrangements that follow the dissolution of a previous marriage tend to form another nucleus, with the “new couple” and the children from the previous and current unions. Despite the apparent predominance of the nuclear format, statements point to the importance of other family members, which suggests an extended family (when other relatives or persons who are not related cohabit with the nuclear family). The presence of the grandmother, usually on the mother’s side, is significant in the trajectories of some of the informants.

The setting is characterized by a matrifocal configuration, a fact widely documented in the literature on families in poorer populations in Brazil (Woortmann, 1982; Neves, 1985; Scott, 1990; Fonseca, 2000). This organization and the grandmothers’ explicit

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<sup>4</sup> The *carteira de trabalho* is a document that serves as official proof of employment and, therefore, guarantees access to workers’ rights. Having a job with a signed *carteira de trabalho* means being formally employed with all legal protections. (Translator’s note)

presence highlights the degree of cooperation between relatives in this social universe. The fact that mother, father and children live in the same house does not exclude the possibility of matrifocal arrangements from structuring these families' everyday lives (Neves, 1985).

Single-parent arrangements are also found, although in smaller numbers, where only the mother or the father remain with the children. This is a growing phenomenon both in the poorer socio-economic strata and among the middle classes, in which “interrupted or undone conjugal unions alter the life pattern for women and their children” (Berquó, 1998: 432). For the most part, single-parent arrangements are families headed by women and there is a frequent correlation between this type of arrangements and so-called “matrifocal families”, “made up of mothers and children in which the presence of a father-spouse tends to be temporary or unstable” (Durham, 1983, 30).

Demographers have attributed the increase of single-parent households to the instability of conjugal ties. These nuclei are formed by increasingly younger women, mostly separated or divorced. Berquó contrasts the information from 1995 to data from 1970, when the single parent group was largely made up of widows. Berquó claims: “marrying, having children and separating take increasingly less time” (Berquó, 1998, 431). The increase in single-parent households is also attributed to the increase in single mothers. This is especially significant, since the literature on families from poorer segments of the population has repeatedly identified households headed by women as arrangements at risk and in situations of poverty. Furthermore, there are those who point to TP as an important factor in this type of arrangement.

There is a common trend among informants' parents: in most cases, they seem to have stable relationships demonstrating 20 to 30 years of cohabitation. This fact seems to contrast with the trajectories of many informants who have initiated and ended conjugal relationships. However, in five cases, there are accounts of siblings on their father's side, who the informants know exist, but whom they don't know personally or with whom they have little contact. Therefore, the analysis of my informants' conjugal trajectory denotes a certain rupture with their mothers' pattern, it also indicates a repetition of their fathers' conjugal (and reproductive) histories. The current stage of the youths' trajectories would correspond to a period of experimentation or ephemeral ties, preceding a more “stable” future relationship.

In order to explore the hypothesis of TP as a repetition of the family of origin's reproductive history, I will discuss the trajectories of the informants and of their parents based on the criterion “age at first pregnancy”. Although we lacked information on some parents,<sup>5</sup> nine out of fifteen mothers probably had their first child before the age

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<sup>5</sup> Some interviewees could not inform their parents' ages or other characteristics. It is not unusual to find references in the literature to the issue of youths having little information about their parents' trajectories, and even less so about their grandparents' trajectories. This can also be found in Pais (1993).

of 20,<sup>6</sup> as did three fathers. Comparatively, eight informants had their first child at an earlier age than their mothers, and three at the same age. Only two had their first child at a later age than their mothers. This same pattern is repeated with regards to the fathers. Ten of the informants had their first child at an earlier age than their fathers.

In the informants’ accounts, no reference is made to “being too young” to have a child and the term “adolescent pregnancy” is not used, since getting married and having children at a certain age was socially expected. In a study carried out in the early 1980s, Neves (1985) states that the “socially standardized age at which youths should start new family units is set between 15 and 18 years for young women and 19 and 22 years of age for young men” (Neves, 1985, 205). Marriage was “defined by the loss of virginity, by maternity and paternity and by the possibility of cohabitation”. “Getting married” resulted in “having children”; the consequence of “getting pregnant” was “cohabitation” or even “getting married”. It was thus socially expected for the previous generation to get married and/or have children at around 20 years of age. The difference nowadays is the evaluative dimension and qualification of such unions as a social problem, attached to so-called “early reproduction”. Actual outcomes do not seem to differ very much when comparing the current generation to their parents.

A comparison between the ages of the informants and their partners at the time of the first pregnancy may be fruitful:

### Comparison between the ages of informants and their partners at the time of the first pregnancy

Identification / Ages***	Age of young man at 1 <sup>st</sup>	Age of partner at 1 <sup>st</sup> pregnancy
Alex	18	15
Beto	17	12
Cláudio	17	19
David	17	18
Elton	15	19
Flávio	17	16
Gilson	15	15
Herbert	18	15
Ivan	18	15
João	15/16	18
Leandro	19	15
Marcelinho	15	15
Nelsão	18	17
Oscar	19	15
Paulão	16	16

\*\*\* Fictitious names, in order to preserve informants’ anonymity.

<sup>6</sup> It should be noted, for classification and comparison purposes, that a pregnancy before the age of 20 is currently defined as a TP. Certainly, those pregnancies were **not** considered “TP” by the youths’ parents’ generation.



Partners' ages do not necessarily correspond to their first pregnancy, although that is the case for most. There are previous stories of abortion. All depicted pregnancies were carried to term and represent the **first live-born child** of each woman. These ages also correspond to the pregnancies that led to the **first live-born child** of each informant. We cannot know for sure whether this is the first pregnancy in which the informant was involved, since pregnancies that ended in abortions were excluded, as were potential pregnancies of which the informants were not aware. We can also observe the age proximity between the informants and their partners. The partners are for the most part younger. However, there is a peculiarity in this generation when compared to that of their parents: there are four cases in which the partner is older than the informant, a situation that is totally absent in the previous generation.

The hypothesis present in the literature on TP regarding the possible influence of the age at which parents had their first child on their children's propensity to become adolescent parents is rejected by some authors. Luker (1996), for example, claims that other factors such as school failure and poverty need to be taken into consideration. Luker argues that reproduction takes place sooner among poorer segments of the population, configuring a *traditional reproductive pattern*. This would contrast with a *contemporary reproductive pattern*, mostly associated with groups from other social strata. The recent phenomenon of middle and upper class women who delay maternity until after they are 35 years old is a good example.

Many of the informants have siblings who are also “adolescent” mothers or fathers. However, this serves to corroborate the argument that reproduction occurs “earlier” in this group, configuring a *traditional reproductive pattern*. This pattern is perceived by many as almost “natural” and not a “detour” in their life course, much less an “aberration”.

Informants' mothers also had a long reproductive career, a sort of inversion of TP. Several informants have siblings who are much younger than they are, with ages varying between 25 and 3 years, or 26 and 4 years, to give two examples. One informant explicitly stated that his mother's last pregnancy happened as a result of careless contraceptive use.<sup>7</sup> Beyond contraceptive failure, the birth of these later children could indicate the presence of certain values, such as a radical opposition to abortion—expressed by informants and their mothers—and the difficulties both men and women from different generations encounter in using contraception.

## Men, contraception and classification of women

The idea of a process and a transition into adult life does not lead to an adult-centric view. Focus is placed on a set of small and successive first time experiences that

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<sup>7</sup> Both the informant's mother and partner were pregnant and had their children at roughly the same time.

modulate the youth’s socialization, such as their first romantic relationship, their first sexual experience, their first job, their first pregnancy and/or child (Heilborn et al., 2006). Though the process of socialization of sexuality is little studied, especially from the male point of view, it is accompanied by a socialization of contraception. However, gender issues act synergistically in this setting, since responsibility for and concern with contraception are repeatedly attributed to women (at least over the last 40 years, with the advent of the birth control pill). Thus, when it comes to controlling reproduction, this cultural setting defines the consequences of sexual acts as inherently a female issues (Arihla, 1998) from which men are excluded (Garcia, 1998).

Contraception raises issues, however, that go beyond access to and use of contraceptives—and not only for youths. The context of the relationship, the type of partner, and the possibility of negotiation within sexual-affective relationships are all central elements in understanding contraceptive and reproductive behavior.

There is a multitude of situations in this ethnographic universe. Pregnancy may occur within a marriage, consolidating the union. However, most pregnancies occurred while the couples were dating and the nature of the relationship was crucial to the fate of the pregnancy. In stable relationships, the acknowledgment of paternity was less problematic or conflictive, whereas in casual relationships doubts were raised concerning paternity.

Relationship classification is closely articulated with the categorization of partners. An extremely strong logical operator distinguishes women “of the home” from those “of the street”. Therefore, the partner’s “qualification” is central to understanding the symbolic order that underlies the ways in which these young men protect themselves both against sexually transmitted infections (STIs) and against the “risk” of a pregnancy.<sup>8</sup>

There is a chronological order to events: contraceptive behavior always begins after the first sexual encounter. There were no cases in which any contraceptive method was used during the couple’s first sexual encounter. Only afterwards do the informants seek to find out (“ask”) whether the partner “is on the pill” and, when not, there is a tendency to provide it or to recommend a medical appointment. The correct use of the pill is of no concern to the informants. Under other circumstances, no contraceptive methods are used despite consecutive sexual encounters. There are several cases in which informants claim that women are exclusively responsible for reproductive life. Others (always) claim the unpredictability of sexual encounters as a justification for the non-use of any contraceptive method.

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<sup>8</sup> The moral classification of partners as women “of the home” or “of the street” can also be illustrated with the issues involved with condom use. This separation works as a logical operator in the informants’ distinction and selection of partners. This statement is exemplary: [Have you ever worn a condom?] “Yes, with those women of the street, I wear them, but with the woman of the home, my woman at home, I don’t. It’s not good”.

To presume that youths have a contraceptive project that harmonizes with their actions assumes a high degree of rationalization of relationships and even their predictability—a questionable proposition (Luker, 1996). Here, I highlight the practice of adopting contraceptive methods after the beginning of a sexual-affective relationship. Most partners (10) were virgins at the time they started their relationships with the informants and the time between sexual initiation and pregnancy varies. One could wonder whether the fact that they were virgins could represent a certain guarantee, in the men’s imagination, that these women are not “*pipavoada*”<sup>9</sup> or “*moçarodada*”<sup>10</sup> and are, therefore, “*mina de fé*”.<sup>11</sup> This model, which opposes the “woman of the home” to the “woman of the street”, is seen as an ordering principle of gender relations and has been widely studied in Brazilian society (Da Matta, 1985). Thus, gender attributes play a relevant role in the type of behavior adopted (Salem, 2004). Additionally, the literature notes that male sexuality, at least in Brazilian sexual cultures, is frequently represented as uncontrollable and, consequently, being a man means having less control over sexual impulses. Greater female control over these impulses is seen as a counterweight, either in containing men’s advances or in women’s supposed command of reproductive life.

## Nuances in pregnancy and contraception events

The contexts and meanings of each pregnancy in the informants’ life trajectories allow us to outline some trends. They also evince the heterogeneity of situations when compared to what is commonly presented by the literature on TP. To speak of a “wanted” adolescent pregnancy is, in many cases, an improvement with regards to most of the literature, which employs as arguments the indelible damages caused to youths (to young women, to be precise) due to a pregnancy and/or parenthood, almost always described as “early” or “unwanted”.

However, the category “wanted” is still problematic. In most research situations, informants speak firstly about their child’s birth, and, therefore, it is difficult to state that the child was unwanted. Additionally, an unwanted pregnancy can turn into a wanted baby. For instance, Luker (1996, 154) questions the categories “(un) wanted”, “(un) planned” and considers that “wanting” should be included in the context of adolescents’ possible choices which, according to her, “are frequently very limited”. Vilar and Gaspar (1999) opt for the expression “(un)wanted pregnancy”. They state that pregnancies are not always *unwanted*, but may be *conjugally planned* and may also happen *accidentally*, without planning. Finally, they argue that pregnancies may *become wanted* through an “assimilation process”, being *accepted* both by the youths and their social circles.

<sup>9</sup> Literally a loose kite. In this context it means a woman who has had multiple sexual partners. (Translator’s note)

<sup>10</sup> A woman who “has been around the block”, similar in meaning to “*pipavoada*”, see previous note. (Translator’s note)

<sup>11</sup> A “faithful woman”. (Translator’s note)

The “process of assimilating the pregnancy” has some salient characteristics (Vilar and Gaspar, 1999, 61). The most common situation among adolescents is that the pregnancy is carried to term despite being unplanned. The baby’s father tends to accept the child, as the youth’s parents<sup>12</sup> tend to welcome the grandchild in their affective exchanges. The youth’s friends value the baby’s birth and childhood and filial relationships are generally valued. The temporary “destructuring” brought on by the pregnancy is mended in the course of the youth’s trajectory by the assimilation of the episode within school, work and the family environment, enabling its framing within the “natural order of things” (Vilar and Gaspar, 1999, 73). Some authors (Vilar and Gaspar, 1999; Le Van, 1998) also believe that a TP can serve as a “social anchor”, enabling the establishment of bonds (with partners, friends or family members), and becoming a “life project” amid a “destructured” phase. They argue that adolescent maternity (and paternity) can thus create forms of social redefinition for the youths, as it re-orientes the meaning of their lives.

Roughly speaking, the set of interviews has cases in which: a) the pregnancy is deliberately “planned” by the couple; b) the pregnancy happens “accidentally”—when accounts hint at scant and precarious knowledge of the reproductive cycle and of contraceptive methods, leading to inconsistent use; c) the possibility of pregnancy is present, but the risk, although felt, is not fully verbalized, indicating a “tacit agreement” between the couple. These categories are not emic, but etic, and constructed from a biographical retrospective carried out by the informants.

We cannot lose sight of the fact that events are constantly re-visited and re-signified. At the very least, it is possible to infer a certain “function” or position that the birth of a child plays in the youth’s trajectory. Based on the empirical material, we can conclude that pregnancy, even when unpredicted, is assimilated by the youth and his social network (family members, peers, etc.) and carried to term in most cases. Thus, pregnancy and, above all, the acknowledgment of paternity can impact their biographical trajectory in such a way as to become a “point of anchorage blocking social drift” (Le Van, 1998; Vilar and Gaspar, 1999). However, the same event can contribute to the youth’s incursion into criminality.

In short, I do not intend to exhaustively classify all cases of pregnancy found in the empirical material. I merely seek to illustrate how varied the stories are and how they differ from the homogenizing image with which TP is usually portrayed.

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<sup>12</sup> Specifically, the authors refer to the young woman’s parents, since the material largely deals with the feminine universe (Vilar and Gaspar, 1999).

## “Planned” pregnancy

In evaluating some pregnancy episodes, informants state a clear plan to get pregnant and express the desire to have a child. In these cases there is a radical opposition to abortion. There are also variations in the degree of family support. In some cases, there is a clear re-orientation of the informant’s life project due to the child’s birth.

One informant (Alex, 19 years old) had cohabited with his partner for two years. She stopped using hormonal contraception because they both desired a child. He narrates occasions in which the partner thought she was pregnant, but were only “*false pregnancies*”. The couple continued trying to get pregnant. In Alex’s account, family roles are clearly divided and the part of ‘husband-father-provider’ was his to play.

This case cannot be classified as an “early”, much less “unwanted”, pregnancy, even if we only consider the respective ages of the partners (15 and 18). The setting in which the story unfolded makes clear that this pregnancy played the role of a point of anchorage in the face of social drift (Le Van, 1998; Vilar and Gaspar, 1999). A former inmate of an institution for juvenile offenders, Alex categorically states that his son changed his life’s course: “[he is] the reason I’m still around, that I left it all behind, otherwise I’d be dead now. I got into a lot of trouble, I only thought of doing wrong!”. Alex claims that he was a “violent boy” and, while playing with a friend, a gun went off and the friend died. The incident was classified as “Russian roulette” game, and Alex was arrested. He believes his son made him rediscover his “reason to live”.

Another informant (Herbert, 19 years old) also states that his first child was deliberately planned by him and his partner. When they decided to have a child, they had been dating for four years. There was no tension when the pregnancy was discovered. He states that his girlfriend’s mother always knew everything that happened between them: “Everything that happened between us, her mother knew, there was no way to hide it. So it wasn’t a surprise to anyone in her family”. The flow of events was very different with regard to his own family. His mother stated in her interview that she found out about the event from a third party around the 6<sup>th</sup> month of pregnancy. In her opinion, her son hid the fact because he was sure she would say he was “irresponsible”. Though little has changed with the child’s birth, she says her son “screws up” less (referring to the motorcycle robberies her son carried out). The acknowledgment of changes brought about by the child’s birth is reasserted by the informant: “I now think ‘I have a child’, I have to get my head in its right place and become more mature”.

The turning points in these informants’ biographical trajectories are more subtle and subjective than a mere alternation between school and work. These two episodes display another dimension: the meaning of having a child to the young man’s life. Both are cases in which paternity, besides being planned or desired, represents a “social anchorage” in the terms put forth by Vilar and Gaspar (1999) or even an “antidote to anomie”. In neither case was there any mention of abortion.

The pregnancy in which David (22 years old) is a protagonist was characterized as “fast”, arising from a “strong passion” for a “girl who played hard to get”, who had recently arrived in the community. Though she was “tough to conquer”, it was not long before David started dating her. The informant considers himself a “very naughty boy, a slut, a real slut” in stating that he had gone out with most of the women in the community. The couple started having sex, but “the five boxes of condoms” they had bought lasted only two weeks.<sup>13</sup> Thus they stopped using contraception and the partner became pregnant. David states that they both wanted the pregnancy and did not give into the mother’s pressure to abort:

So I wanted to have the baby because all my friends had [children], you know, at the time. (...) I was the only one who wasn’t a father. (...) But I wanted to have a child because I thought that having a child, having someone, if some day, say, I separate from the mother, I will still have the baby. Have someone with me. Because at the time I felt really alone. Despite having many girlfriends, I felt alone. So, I preferred to have the baby. (David, 22 years old, first child at 17)

One cannot ignore the change in life course brought about by paternity in this case, even though it is not explicitly stated. David worked for the local drug boss, cleaning guns in exchange for money and drugs. The profits then went to buying “brand clothes” and “gold chains”. He started working at a video rental store earning minimum wage. I do not have the data to specify when the informant stopped working for drug dealers. However, there is a clear turning point in David’s trajectory, related to the birth of his daughter. Evidently, it is not possible for me to state that these are long-lasting changes, but there is a connection between these events which, at the time of the interview, worked towards structuring meaning for the informant.

There is yet another episode in which the project of having a child and the voluntary interruption of contraceptive methods are present. However, the outlines of this story point to a process of social identity construction. Elton (19 years old, first child at 15) had dated his partner for about a year when he proposed that they have a child. If, from an ethnocentric point of view, a second pregnancy could represent a worsening of life conditions for this poor young man, from his point of view “it was easier” because “it was my own decision, since I really wanted it in order to be able to. I had the pleasure of having the child, this child of mine, I really liked it”. The narrative reveals a weak reaction from the families. The partner had told her parents she was “thinking about” getting pregnant and received the answer “it’s up to you”; the informant states that the partner’s parents merely alerted her to the fact that he already had a child with another woman. Regarding his own family, Elton states that there was “no problem, nobody said anything, it was normal”. However, the partners were late in informing the parents about

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<sup>13</sup> “I... because I was very greedy when it came to sex, I wanted it every day and did it every day. So, one day it was four times. I had to do it at least three times in a twenty four hour span. Three times in one day.” (David, 22 years old)

the pregnancy: “it was like a surprise. When they noticed, she already had a really big belly”.

In many cases the informants point to other cases of friends and/or family members who also had children at a very close age to their own. One of Elton’s partner’s younger sisters, for example, was also pregnant at the same time. Both had their children and continued living at their parents’ house with their respective offspring.

Elton claims that his partner liked being a mother, since she “started to take care of her own child”, not only those of her younger siblings.<sup>14</sup> As for the repercussions for Elton, he considers that he was “a more serious guy” ever since he was young, noting that he did not play with boys his age, but with older young men: “I wanted to be an adult”. He was the first of his friends to become a father and states that:

To me, a man has to have a child, otherwise he is not a man. To me, I have a child and I can have more children, to show, to prove to other people that I can have a child. A man has to have a child, otherwise he does not show what he definitely is: ‘I am a man, I’m going to prove to everyone that I am man’. So, it’s having a child and being happy. (Elton, 19 years old, first child at 15)

The four cases I presented have as outcomes the acknowledgment of paternity and of the bond with the partner, whether by cohabiting before or after the pregnancy, or by a “non-cohabiting conjugality” (Segalen, 1999).

### “Accidental” pregnancy

Other episodes have similarities with the so-called “unwanted” pregnancy portrayed by the literature on TP. The shared traits are the unpredictability of the pregnancy and a peculiar attitude toward contraceptive methods: either the informants thought themselves totally safe or they left the responsibility for the matter entirely to the women.

In the cases of Beto and João (second pregnancy), concern with contraceptive care was not present. Beto (19 years old) believes that women are the ones who should be “more aware” and “take care”, because “men almost don’t think at these times”. As for João (21 years old), he claims that he felt safe, or rather, he was not concerned with it because, since his partner was older, she would “certainly” know what to do “in order to not get pregnant”. This pregnancy happened with a partner who was nine years older

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<sup>14</sup> A qualitative research with young women who became mothers before the age of 15 (Costa, 2002) discusses the existence of a propitiating connection between early motherhood and contexts of strong social precariousness: the interviewees claim that the birth of a child does not much alter their routines, considering that, since childhood, they played the role allocated to adult women long before they were mothers. Everyday life was heavily marked by domestic activities, as well as the care of younger children so that their mothers could go to work. This setting promotes a certain family and gender socialization in which being a mother and/or housewife is a central element in the female identity.

and already had two daughters. Since he thought she was “tied down”, neither of them used any contraception.<sup>15</sup>

In the cases of Elton (first pregnancy) and Oscar (20 years old), there is some degree of disquiet with regard to contraception, but they were “certain” about knowledge that was, in fact, precarious. The first claims that pregnancy could only happen with “continuous relations”. He started using condoms when “she was close to her getting her period, about three days before, because a doctor said that we might run the risk of us having sex and her getting pregnant during that time, that it was close to a menstrual I-don’t-know-what”. Oscar, on the other hand, claims that he was not worried about the possibility of a pregnancy because his “partner was more of an adventure” and that he had complete confidence in “his” method: withdrawal.

The men’s reactions when faced with the news of pregnancy also displayed similarities. Beto uses expressions such as “it was unexpected”, “it was an accident” and “it was a sad story” to describe the event. Elton says that he “didn’t expect that to happen, it wasn’t something I wanted” and attributes the pregnancy to a “medication swap” (he is referring to a scandal in Brazil where pills made of flour were sold in place of contraceptive pills). Oscar declares that “the shock was great” and that “God punished” him because he had never thought of having a child (this informant had cohabited for two years with another partner, who never became pregnant). João categorically states that it was his partner’s “mistake”:

It was her mistake, because she has two daughters, so she had her tubes tied. Then, after seven years, that knot came undone, she didn’t know and got pregnant. These things... Right at my time, she completed those seven years! (João, 21years old, first child at 15/16)

Despite the “shocks” and “unexpected” news, the option was made to carry the pregnancies to term after disputes concerning abortion, in some cases, a possibility the informants claim they oppose.

The outcomes of these stories become more congruent in light of the argument that all pregnancies have some meaning (Le Van, 1998) and that they can undergo a process of assimilation if unplanned. Through different means, the child is progressively incorporated into the youths’ networks of exchange. The families are a crucial element, with their varying degrees of support, in the young men’s decision to “acknowledge” paternity. This acknowledgment is also heterogeneous and may or may not exclude

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<sup>15</sup> “Amarrada”, literally “tied down”, meaning, in English, “had her tubes tied”. (Translator’s note)



the partner. However, the effort of “acknowledgment” illuminates characteristics of the processes of construction of male identity (Cabral, 2002).<sup>16</sup>

## “Tacit” pregnancy

I use the word “tacit” to describe a type of implicit agreement, not verbalized by the couple, who know that, in having sex, a pregnancy may occur. The idea that there is an underlying risk to sporadic contraceptive use is present, but this knowledge is not clearly rationalized. This discussion can come from two levels of arguments that are in principle complementary. On the one hand, the risk is incorporated into the TP phenomenon when treated as part of the transition from youth to adulthood (Heilborner *et al.*, 2002). The same thing happens from the point of view of the youth’s capacity to project actions and their consequences into the future (Luker, 1996). On the other hand, the pregnancies end up in some way being “assimilated” and create turning points in the youths’ trajectories.

In terms of “weak planning”, we can classify the cases involving the six informants that have not yet been mentioned as “tacit pregnancies”. Their reactions to the “unexpected” news are diverse. They go from “I did not expect it” to “I was euphoric” to become a father. Two informants raise the hypothesis that the pregnancy was a strategy for their partners’ to firm up a union.

Cláudio (23 years old) states that his first pregnancy happened after he had been in a relationship for a year and two months. He states that his partner lost her virginity with him, so he started buying hormonal contraception for her. According to Cláudio, his partner forgot “to take the pill”, but in his version: “She already wanted to be with me, so getting pregnant was the faster way she managed, a faster way to come live with me. After she got pregnant, and since then until now, she has always been with me.” The pregnancy of his second child with the same partner was also unplanned, but “it was to be expected” since they had sex without using any contraceptive method.

Nelson (21 years old), on the other hand, claims he was “caught off guard”. He had dated his partner for over a year and she was using hormonal contraception. He claims that she decided to stop using the pill suddenly and without telling him straight away. She only told him a month later, justifying it with the fact that she “wanted to get pregnant”. Nelson did not use any other contraceptive method because “it was a done deal, the time had passed and it was of no use”. In his opinion, the partner wanted to

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<sup>16</sup> João’s narrative is exemplary of male pride in conquering and impregnating the partner: “She was an older woman, she is a hell of a woman, so I went out with her, I got her pregnant. The girls notice: the guy must be really good for her, she became pregnant by him. Her colleagues also came on to me a lot, but since I liked her, that attention went nowhere.” This pregnancy, although unexpected, contributes to the affirmation of masculinity in terms of the informant’s virility. The “conquest of a hell of a woman” stands out among his peers, crowned by the fact that he impregnated her. That is, the fact that his sexuality was made explicitly public by his partner’s pregnancy gives value to his masculinity.

get pregnant because she “saw her friends having children” and also because “she wanted to trap me”.

Paulão (19 years old) recounts the cases of pregnancy in which he was a protagonist in a dramatic tone. He states that his partner’s first pregnancy coincided with the first time she had sex and that it “was bad luck...it was nerve-racking”. His first thought was to “get rid of it”, but he gave up on that idea and decided to “try being a father” (the partner was opposed to abortion). Paulão states that his mother complained a lot when she found out about the pregnancy and that he was “severely chastised”. However, her reaction was worse when she found out about the second pregnancy. Despite claiming that it was “less tragic” than the first, the couple decided to have an abortion. There were unsuccessful attempts with teas: “if we had been successful, there would [now] only be one [child]”.

Ambiguous reactions are present in the other cases of pregnancy I collected. Ivan, for example, states that the pregnancy “was and wasn’t planned”, since “we already knew it would happen, without taking the pill...”. He bought hormonal contraception for his partner (an only child) and hid it in his house. He states that she started feeling sick because of the contraceptives and, fearing that her mother might find out, she stopped taking it. The couple abandoned the pill, but did not adopt another contraceptive method. The pregnancy happened “after about three months, then it was no longer possible, then we had to tell her mother”.

Despite his partner’s pregnancy happening at the beginning of his relationship, Flávio (19 years old) claims he was not “scared” by it: “When my daughter came, it wasn’t planned at all. I won’t say it was an accident, but it wasn’t planned.” He used condoms intermittently. Despite stating that he did not expect that “this could happen”, Flávio hastens to add that “I always wanted a child, while I was young”, in order to “become responsible”, implied by the start of working life and associated with the constitution of a conjugal nucleus.

If, on the one hand, the pregnancy episode that involves Flávio hints at a movement towards “taking responsibility” and “setting an example for his daughter”, Gilson’s trajectory took an opposite turn. He still studied and lived with his mother when the first pregnancy happened. A child of separated parents, Gilson (19 years old) states that his mother “didn’t say anything” and “accepted” the child. His father, despite not “liking” the fact that Gilson got his partner pregnant, still contributed to his granddaughter’s baptism. However, it appears that he backtracked on financial support for the child. A second pregnancy did not take long to occur and, when questioned about the possibility of a new pregnancy after they had resumed having sex, Gilson answered “she got pregnant right away”. The interval between pregnancies was very short<sup>17</sup> and

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<sup>17</sup> At the time of the interview, Gilson’s children were aged 3 years, 1 year and 3 weeks, respectively.

the informant did not discuss contraception at length, nor did he show any interest in the contraceptive method possibly being used by his partner. He claims he had never thought of having three children, but “it happened”. After the first pregnancy, Gilson left school in search of a job, but the family is still supported by his mother, his mother-in-law and the thefts he carries out: “I know I have a responsibility to my children, it’s bad for me to leave my son crying for milk. I don’t allow these things to happen. I chase after [money], I’m not going to stand still”.

## Acknowledgement of paternity

Several outcomes are possible for “adolescent pregnancies”. There are many different situations and not all adolescent parents are “irresponsible”. The degrees of family support vary, as do the ways of acknowledging paternity, from strengthening the bond with the partner and cohabitation to the exclusive incorporation of the child.

In the interviews, the family of origin’s participation is highlighted, not only in terms of having welcomed the couple (the young mother) into their home, but above all in terms of material support for the child. The money the informants receive for their work/odd jobs are, in principle, insufficient to support a child. This shows a “moral acknowledgement of paternity” in more than its effective material dimension, since the financial support comes from the families of origin.

Pregnancy episodes that follow the start of sexual activity for the young woman indicate the permanence of traditional gender roles and relations. The “acknowledgment of paternity” might be interpreted as a reparation or a counter-gift in exchange for the young woman’s deflowering. There are also cases of pregnancy close to the start of the young man’s sexual life. Both situations can be contextualized, according to a sexual and gender culture that impels/incites the man not to control his sexual impulses and attributes to women a certain responsibility with regards to contraceptive issues (Cabral, 2003). This setting promotes men’s lack of knowledge of contraceptive methods. Above all, we should consider the hypothesis that pregnancy is a relevant way of publicizing the start of a young man’s sexually active life. It should be added that “acknowledging” pregnancy, a synthesizing category for “taking responsibility for one’s actions”, condenses the behavior valued by the young men, their family members and peers and is also a sign of an adult, virile life.

The positive effects of a child’s birth, expressed in the accounts as “maturity” and “taking responsibility”, are emphasized by the informants. The category “responsibility” encompasses the new position he is to take up in life: men need to give up “playing around”, “acting like kids” and abandon excesses in order to reach another status, one that involves seriousness, obligations, bonds and reliability. The losses brought about by paternity are clearly acknowledged. Informants acknowledge changes in

sociability, since the imperatives of “setting an example” and “having to work”<sup>18</sup> signal a certain reduction of free time left for “fooling around” and for being with peers, which is frequently subsumed in the expression “loss of freedom”.

My informants state that paternity means maturity and responsibility. Thus, if the transition into adulthood is defined in terms of a progressive incorporation of attributes characterized by residential/conjugal and professional/financial autonomy, the birth and acknowledgment of a child seems to add to the process. Though financial and material autonomy may be relative, in practice, informants’ discourses are permeated by a moral obligation that impels men to take on and perform the role of provider. “Having responsibility”, a direct consequence of paternity, implies incorporating new roles. In other words, acknowledgment of paternity effects the transition from one condition to another: to some, it represents the consolidation of the process of transitioning into adult life; for others, it intensifies that transition. Further still, if getting pregnant acts as an important role in the construction of male identity, since it means publicizing the man’s potency and virility, it is the acknowledgment of paternity which enables a young man to consolidate his image as “mature”, “responsible” and an “adult”.

The pattern found among my informants is not, in many ways, incongruous with that of their parents’ generation. It can be said that the redefinition of expectations concerning youth, in terms of schooling, entry into the job market and the adequate age at which to have children, determine a central role in configuring the “precociousness” of paternity with regard to the youth’s social trajectory.

To summarize, in conceiving of youth as a biographical process in which the characteristic predicates of adult life (material and residential autonomy) are progressively acquired, it becomes possible to question to what degree a “teenage pregnancy” intensifies this transition in the context of the poorer segments of the Brazilian population. The life courses I have analyzed above, from the point of view of youth paternity in the poorer segments of the population, are, at one and the same time, examples of a traditional form of transition in which there is a short or condensed passage to an adult state and of a certain model of male trajectory in these social groups.

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<sup>18</sup> In this universe, a moral imperative incites the man to seek work (Duarte, 1986).

## References

- ARIÈS, P. 1981. *História Social da Criança e da Família*. Rio de Janeiro: Guanabara.
- ARILHA, M. 1998. Homens: entre a “zoeira” e a “responsabilidade”. In: ARILHA, M.; S. G. U. RIDENTI, & B. MEDRADO. (Eds.). *Homens e Masculinidades: outras palavras*. São Paulo: ECOS/ Ed. 34.
- BAENINGER, R. 1999. Demografia da população jovem. In: SCHOR, N. et al. (Eds.). *Cadernos Juventude, Saúde e Desenvolvimento*. Brasília: Ministério da Saúde, Secretaria de Políticas de Saúde, vol. 1.
- BERQUÓ, E. 1993. Brasil, um caso exemplar – a anticoncepção e partos cirúrgicos – à espera de uma ação exemplar. *Revista Estudos Feministas*, vol.1 (Supl.2), pp.367-81.
- BERQUÓ, E. 1999. Ainda a questão da esterilização feminina no Brasil. In: GIFFIN, K. et al. (Eds.). *Questões da saúde reprodutiva*. Rio de Janeiro, Fiocruz, pp.113-26.
- BERQUÓ, E. 1998. Arranjos familiares no Brasil: uma visão demográfica. In: *História da Vida Privada no Brasil. Contrastes da Intimidade Contemporânea*. Vol. 4. São Paulo: Companhia das Letras.
- BERQUÓ, E & S. CAVENAGHI. 2005. Increasing Adolescent and Youth Fertility in Brazil: A New Trend or a One-Time Event?. (Mimeo). *Annual Meeting of the Population Association of America*, Philadelphia, Pennsylvania, March 30 to April 2, 2005, Session #151, Adolescent Fertility in Developing Countries.
- BOMBA RELÓGIO. 2005. *O Globo*. Rio de Janeiro, 11 maio. Primeiro Caderno, Opinião, p.6.
- BOURDIEU, P. 1983. A “juventude” é apenas uma palavra. In: *Questões de Sociologia*. Rio de Janeiro: Marco Zero.
- CABRAL, C. S. 2002. *Vicissitudes da gravidez na adolescência entre jovens das camadas populares do Rio de Janeiro*. (MA Thesis, Public Health). Rio de Janeiro, Instituto de Medicina Social / Universidade do Estado do Rio de Janeiro.
- CABRAL, C. S. 2003. Contracepção e gravidez na adolescência na perspectiva de jovens pais de uma comunidade favelada do Rio de Janeiro. *Cadernos de Saúde Pública*, vol.19 (supl.2), pp.283-92.
- CAMARANO, A. A. 1998. Fecundidade e anticoncepção da população jovem. In: *Jovens acontecendo na trilha das políticas públicas*, vol.1. Brasília, CNPD, pp.109-33.
- CASAL, J. 1999. Modos emergentes de transición a la vida adulta en el umbral del siglo XXI: aproximación sucesiva, precariedad y desestructuración. In: PAIS, J. M. & L. CHISHOLM. (Eds.). *Jovens em mudança – Actas do Congresso Internacional Growing up Between Centre and Periphery*. Lisboa: Instituto de Ciências Sociais da Universidade de Lisboa.
- COSTA, T. de J. N. M. 2002. A maternidade em menores de 15 anos em Juiz de Fora (MG): uma abordagem socioantropológica. *Praia Vermelha. Estudos de Política e Teoria Social*, n.7, segundo semestre, p. 154-183, Programa de Pós-Graduação em Serviço Social/UFRJ, Rio de Janeiro.

- DA MATTA, R. 1985. *A casa e a rua*. São Paulo: Brasiliense.
- DUARTE, L. F.D.1986. *Da vida nervosa nas classes trabalhadoras urbanas*. Rio de Janeiro: Zahar.
- DURHAM, E. 1983. Família e Reprodução Humana. In: FRANCHETTO et al. *Perspectivas Antropológicas da Mulher 3*. Rio de Janeiro: Zahar.
- FONSECA, C. 2000. *Família, fofoca e honra. Etnografia de relações de gênero e violência em grupos populares*. Porto Alegre: Ed. Universidade/UFRGS.
- GALLAND, O. 1997. *Sociologie de la jeunesse*. Paris: Armand Colin.
- GARCIA, S. M. 1998. Conhecer os homens a partir do gênero e para além do gênero. In: ARILHA, M.; S. G. U. RIDENTI & B. MEDRADO, B. (Eds.). *Homens e Masculinidades: outras palavras*. São Paulo: ECOS/ Ed. 34.
- HEILBORN, M. L. et al. 2002. Aproximações Sócio-antropológicas sobre Gravidez na Adolescência. *Horizontes Antropológicos*, Rio de Janeiro, ano 7, n. 17.
- HEILBORN, M. L.; E. L. AQUINO; M. BOZON; D. R. KNAUTH. (Eds.). 2006. *O aprendizado da sexualidade: reprodução e trajetórias sociais de jovens brasileiros*. Rio de Janeiro: Garamond/ Editora Fiocruz.
- HEILBORN, M. L.; E. BRANDÃO; C. S. CABRAL. 2007. Teenage pregnancy and moral panic in Brazil. *Culture, Health and Sexuality*, vol. 9, n. 4, July, pp. 403 – 414.
- LE VAN, C. 1998. *Les grossesses à l'adolescence. Normes sociales, réalités Vécues*. Paris: L'Harmattan.
- LUKER, K. 1996. *Dubious conceptions. The politics of teenage pregnancy*. Cambridge: Harvard University Press.
- MARTINE, G. 1989. “O mito da explosão demográfica”. *Ciência Hoje*, v. 9, n. 51.
- MINISTÉRIO DA SAÚDE. *PND 2006. Pesquisa Nacional de Demografia e Saúde da Criança e da Mulher - Relatório*. Brasília/DF, 2008. <[http://bvsmis.saude.gov.br/bvs/pnds/img/relatorio\\_final\\_pnds2006.pdf](http://bvsmis.saude.gov.br/bvs/pnds/img/relatorio_final_pnds2006.pdf)>
- NEVES, D. P. 1985. Nesse terreno galo não canta. Estudo do caráter matrifocal de unidades familiares de baixa renda. *Anuário Antropológico 83*. Fortaleza/Rio de Janeiro, Universidade Federal do Ceará/ Tempo Brasileiro.
- OLIVEIRA, J. de C. 2005. *Perfil socioeconômico da maternidade nos extremos do período reprodutivo*. (Mimeo). IBGE, Diretoria de Pesquisas (DPE), Coordenação de População e Indicadores Sociais (COPIS).
- PAIS, J. M. 1993. *Culturas juvenis*. Lisboa: Imprensa Nacional Casa da Moeda, 1993.
- PAIS, J. M. (Ed.). 1998. *Gerações e Valores na Sociedade Portuguesa Contemporânea*. Lisboa: Instituto de Ciências Sociais da Universidade de Lisboa.

- PAIS, J. M. 1999. Introdução. In: PAIS, J. M. (Ed.). *Traços e riscos de vida: uma abordagem qualitativa dos modos de vida juvenis*. Porto: Ambar.
- SALEM, T. 1981. Mulheres Faveladas: “com a venda nos olhos”. In: Franchetto *et al.* *Perspectivas Antropológicas da Mulher 1*. Rio de Janeiro: Zahar.
- SALEM, T. 2004. “Homem... já viu né?”: representações sobre sexualidade e gênero entre homens de classe popular. In: HEILBORN, M.L. (Ed.). *Família e Sexualidade*. Rio de Janeiro: FGV Editora.
- SANTOS JÚNIOR, J. D. 1999. Fatores etiológicos relacionados à gravidez na adolescência: Vulnerabilidade à maternidade. In: SCHOR, N. *et al.* (Eds.). *Cadernos Juventude, Saúde e Desenvolvimento*. Brasília: Ministério da Saúde, Secretaria de Políticas de Saúde, vol. 1.
- SARTI, C. 1996. *A família como espelho*. São Paulo: Editores Associados.
- SCOTT, P. 1990. O homem na matrifocalidade: gênero, percepção e experiências do domínio doméstico. *Cadernos de Pesquisa*. n. 73. São Paulo: Fundação Carlos Chagas.
- SEGALEN, M. 1999. *Sociologia da Família*. Lisboa: Terramar.
- SIMÕES, C. C. S. 2006. *A transição da fecundidade no Brasil: análise de seus determinantes e novas questões demográficas*. São Paulo, AlbeitFactory Ed. 140 p.
- VIEIRA, A. G. 2005. A assustadora multiplicação dos carentes. *O Globo*. Rio de Janeiro, 3 abr., Primeiro Caderno, Opinião, p.7.
- VILAR, D., A. M. GASPAS. 1999. Traços redondos. A gravidez em mães adolescentes. In: PAIS, J. M. (Ed.). *Traços e riscos de vida: uma abordagem qualitativa dos modos de vida juvenis*. Porto: Ambar.
- WOORTMAN, K. 1982. Casa e família operária. *Anuário Antropológico 80*. Fortaleza/Rio de Janeiro, Universidade Federal do Ceará/Tempo Brasileiro.
- WORLD HEALTH ORGANIZATION (WHO). 2001. *Sexual relations among young people in developing countries: evidence from WHO case studies*. Genebra.