



## Research Related to Bahia Street's Mission & Work

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*Bahia Street breaks cycles of poverty and violence through quality educational programs for impoverished young women and girls living in the shantytowns of Salvador, Brazil. Bahia Street also promotes greater understanding about issues related to race, class, poverty and international development. Many people ask us about research related to the work we do. The information below provides a brief overview of research relating to our mission and work.*

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## I. Pregnancy/Maternity

- About 68% of pregnant youth had their first sexual intercourse around 15 years of ages about 68% of them with their first boyfriend (Goncalves & Gigante).
- Almost 20% of low-income Brazilian women in one study were not using contraceptives during the period of their first pregnancy (Goncalves & Gigante).

### a. Teen Pregnancy in Brazil

- In the last 20 years there has been an increase in the rate of pregnancy among women 15 to 19 years in Brazil (Dias et al.).
- Poor youth that have limited possibilities of obtaining well-paying work may gain greater respect/social status from having a child, especially in the case of impoverished adolescent girls (Almeida et al.).
- Maternity as a social phenomenon is marked by social, racial/ethnic, and gender inequality (Dias et al.).
- One study of three Brazilian capital cities showed that 17.9% of women and 6.3% of males become parents before the age of 20 (Dias et al.).
- About 75% of adolescents from low socioeconomic status in one survey in Brazil had become pregnant before the age of 20; 25% had had two or more pregnancies before the age of 20 (Goncalves & Gigante).
- Teen pregnancy should not be attributed to poverty but rather an individual's social and family background, which may act to discourage the youth from attending/succeeding in school (Almeida et al.).

### b. Maternity and Educational Attainment

- Girls who had interrupted their studies reported that pregnancy and children were main reasons for this interruption (Almeida et al.).
- Fifteen to 19 year old girls with low educational levels consistently had at least twice the probability of having a child compared to youth with more schooling, in one study of Brazilian youth (Almeida et al.).
- Education levels corresponded highly with the postponement of birth of the first child among adolescent girls, particularly in the Northeast (e.g. Salvador, Brazil) (Almeida et al.).
- Fifty-one percent of 15-19 year-old-girls with no schooling were already mothers; 13% of 15-24 year olds dropped out of school because of marriage, pregnancy, or childcare (Almeida et al.), showing the strong relationship between maternity and educational attainment.
- "Almost half of the youth who had interrupted their studies had at least one reproductive episode during adolescence" (Almeida et al.).
- Adolescent female mothers have less schooling than adolescent females who are not mothers (Dias et al.).
- Higher levels of education increased the youth's chances of having conversed about contraceptive methods before their first sexual encounter for both sexes (Teixeira et al.).

*c. Importance of Health/Sex Education*

- The health sector should teach youth about the choice and use of contraceptive methods, ensuring that youth will know what to use and how to use contraceptives properly (Almeida et al.).
- It is important to provide sex education on the use of condoms to help prevent unwanted pregnancies (Teixeira et al.).
- Many adolescents in Brazil still do not have access to information and services relating to their sexual and reproductive health (Teixeira et al.).
- A large number of Brazilian women are unaware of contraceptive methods to avoid pregnancy (Goncalves et al.).
- Youth that use condoms at the beginning of their sexual life tend to maintain this practice, underscoring the need to continue educating youth about condom use (Teixeira et al.).
- The principal preoccupation of female youth is not to protect themselves against pregnancy, but rather to form a link/alliance with their partner (Goncalves & Gigante), demonstrating the need to educate girls about the consequences of early pregnancy, and foster their self-confidence.
- Girls that regularly attended school reported that they received their first information on pregnancy and contraception from their mother; school is also an important source of information among girls (Almeida et al.).

## II. Education

- Salvador had the highest proportion of youth with irregular school histories (82.5% females, 87.8% of males), compared to Porto Alegre and Rio de Janeiro (Almeida et al.).
- Female and male black students are underrepresented in their schooling (Almeida et al.).
- Almost all youth with low levels of schooling had a history of retention, transience, or interactions with people that somehow interfered with their schooling (Goncalves & Gigante).
- Youth tend to cite disinterest in their studies, the need to work and the structure of the educational system, especially within the public realm, as main reasons for dropping out of school (Dias et al.).
- While 80% of the control group planned to attend a university (middle class Brazilians), only 33% of the case group (low-income Brazilians) planned to attend a university (Goncalves & Gigante).

### a. *Health and its Relation to Education*

- Schools perform better when students do not suffer from health risks (e.g. poor nutrition) (Office of Safe and Drug Free Schools).
- Providing nutrition to students in schools translates into greater health, school attendance and retention, overall enhancing student learning (FAO).

### b. *General Benefits of Education/Academic Performance*

- Academic success/performance has been shown to decrease the likelihood of substance abuse, delinquency, teen sexual activity, and violence (Hawkins).
- Higher education may be best predictor of better health (Winkleby et al.).

### c. *Benefits of Female Education*

- Female secondary education appears to reduce infant mortality and fertility rates more than family planning and health programs, especially in countries where female secondary enrollment is low (Raney & Subbarao).
- Higher levels of a mother's education translates into higher levels of contraceptive use among their children (Teixeira et al.).
- Female education has been shown to increase women's participation in labor market along with their wages, improve the health and education of their families, decrease their number of pregnancies, decrease the likelihood of their contracting HIV virus, and promote better governance. In general, increased female education tends to improve a country's economic growth, along with additional benefits. (Herz & Sperling).

### III. Sexual Abuse in Brazil/Salvador

#### a. Prevalence

- The World Report on Violence and Health estimates that up to 25% of women have experienced sexual violence by someone they know. Approximately one-third of adolescents may have experienced a forced sexual encounter. (Leite de Moraes et. al.).
- Between 12 and 35% of females under the age of 18 in Brazil are estimated to have had a forced sexual encounter (Leite de Moraes et. al.).
- One-third of Brazilian women in one study admitted to having suffered some form of threat when being coerced into a sexual encounter (Leite de Moraes et. al.).
- Thirty-five percent more women than men experienced sexual coercion during their childhood in Salvador (Leite de Moraes et. al.).
- Despite the high numbers of forced sexual experiences, it's possible that the true rates of sexual coercion is still underreported (Leite de Moraes et. al.).

#### b. Consequences

- The repercussions of forced sexual encounters are many: anxiety, depression, aggression, sexual and relational difficulties, personality disorders, substance abuse, unwanted pregnancy, and risk of contracting an STD/AIDS (Leite de Moraes et. al.).
- Almost a third of coerced sexual encounters are done so under threat of physical or other forms of violence (Leite de Moraes et. al.).
- Fifty-eight percent of girls who reported that they had been coerced into a sexual relationship suffered physical violence or another type of threat (Leite de Moraes et. al.).
- As the education level of the family grew, the likelihood of coerced sexual encounters diminished (Leite de Moraes et. al.).

#### c. Relation to Poverty/Education/Race/Gender

- Forced sexual encounters of the daughters of mothers who did not finish their basic education was almost double that of daughters of mothers who did (Leite de Moraes et. al.).
- White women and men in Brazil reported less prevalence of sexual coercion than other races (Leite de Moraes et. al.).
- The disparity in the distribution of forced sexual encounters between men and women reflects the different sexual negotiation power between males and females (Leite de Moraes et. al.).
- The main strategy to coerce youth into a sexual relationship in three capital cities of Brazil was insistence (Leite de Moraes et. al.), suggesting the need to foster self-confidence among young girls in Brazil along with techniques to protect themselves against forced sexual encounters.
- The prevalence of coerced sexual episodes was much more common among youth from families with low per-capita income (Leite de Moraes et. al.).

#### **IV. Work and Relation to Education/Maternity/Youth**

- Socioeconomic variables like work and schooling were strongly related to childbearing in adolescence (Goncalves & Gigante).
- Twenty-nine percent of youth in Salvador do not make more than minimum wage (Leite de Moraes et. al.).
- One studied showed an approximately 60% chance that youth in their last schooling year with children were working outside the home (Goncalves & Gigante).
- Many poor Brazilian adolescents worked outside the home before turning 15 (Goncalves & Gigante).
- Even though work becomes more valued at the age of 18-19 by those in the lowest socio-economic group, youth and mothers still considered studies important, but stated that current conditions limited youth's ability to continue their studies (Goncalves & Gigante).

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