Maternal complications and adolescent pregnancy in Latin America and the Caribbean (LAC): A systematic review

Complicaciones maternas y embarazo adolescente en América Latina y el Caribe (ALC): una revisión sistemática

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Abstract

The objective of this study was to identify and analyze maternal complications associated with adolescent pregnancy, with a particular focus on the Latin American context. The research was developed with a qualitative and descriptive approach, applying the PRISMA methodology and using databases such as ProQuest, Scopus and Web of Science. The search equation was used: (("Maternal complications") AND ("teenage pregnancy") AND ("LAC")). After applying a series of inclusion and exclusion criteria, a final sample of 15 articles was selected for analysis. The results included a bibliometric analysis based on the findings, as well as a meta-analysis that allowed the identification of recurring themes and comparison of perspectives between authors. It is concluded that adolescent pregnancy in Latin America and the Caribbean entails significant medical risks and negatively affects the integral development of adolescents, a situation that is aggravated by the lack of access to health services, education and by factors such as poverty. Although family support can mitigate some effects, the urgency of implementing comprehensive sex education policies and improving access to prenatal care and psychological support to reduce this problem is highlighted.

Keywords: maternal complications, teenage pregnancy, teenage motherhood.

Resumen

El objetivo de este estudio fue identificar y analizar las complicaciones maternas asociadas al embarazo adolescente, con un enfoque particular en el contexto latinoamericano. La investigación se desarrolló con un enfoque cualitativo y descriptivo, aplicando la metodología PRISMA y utilizando bases de datos como ProQuest, Scopus y Web of Science. Se empleó la ecuación de búsqueda: ((“Maternal complications”) AND (“teenage pregnancy”) AND (“LAC”)). Tras aplicar una serie de criterios de inclusión y exclusión, se seleccionó una muestra final de 15 artículos para el análisis. Los resultados incluyeron un análisis bibliométrico basado en los hallazgos, así como un metaanálisis que permitió identificar temáticas recurrentes y comparar las perspectivas entre autores. Se concluye que el embarazo adolescente en América Latina y el Caribe conlleva importantes riesgos médicos y afecta negativamente el desarrollo integral de las adolescentes, situación que se ve agravada por la falta de acceso a servicios de salud, educación y por factores como la pobreza. Aunque el apoyo familiar puede mitigar algunos efectos, se destaca la urgencia de implementar políticas de educación sexual integral y de mejorar el acceso a cuidados prenatales y apoyo psicológico para reducir esta problemática.

Palabras clave: complicaciones maternas, embarazo adolescente, maternidad adolescente.

Introduction

Latin America and the Caribbean (LAC) are identified as the most unequal region in the world in terms of wealth distribution and access to opportunities. This alarming inequality implies that the socioeconomic impact of adolescent pregnancy is particularly significant, representing a considerable burden on both public health systems and households. This situation, in turn, diverts social resources toward the management of preventable emergencies, affecting other critical areas such as education, nutrition, and early childhood development. In this context, adolescent pregnancy emerges as a complex issue that not only directly affects the young individuals involved but also reflects and perpetuates the structural conditions of inequity present in the region.

School-related variables further highlight the urgency of a comprehensive approach to adolescent pregnancy. In some cases, social stigmas and restrictive school norms disproportionately affect adolescent boys, leading to institutional rejection, poor academic performance, and even school dropout. As noted by López Reyes (2023), the educational response to this issue remains limited, as sexual education does not occupy a central place in curricular design or public policy. Consequently, it is essential to consider not only the adolescent as a complex subject but also the roles of the state, family, and sociocultural phenomena that influence their development.

Adolescent pregnancy represents an urgent challenge for public health worldwide. According to data from the World Health Organization (WHO), approximately 11% of births registered globally are to adolescent mothers (González-Andrade & Saeteros-Cordero, 2020). Latin America and the Caribbean rank second in adolescent fertility rates, with an average of 51.4 births per 1,000 women aged 15 to 19, surpassed only by sub-Saharan Africa (World Health Organization, 2024). This situation affects low- and middle-income countries most intensely, where 95% of adolescent motherhood cases occur (Bruno et al., 2021).

In addition to the social and economic impact, adolescent pregnancy is associated with a high frequency of maternal and fetal complications. According to the WHO, complications related to pregnancy and childbirth are the second leading cause of death among adolescents aged 15 to 19 (Oviedo-Mendoza et al., 2024). Major causes of maternal mortality include hemorrhage, hypertension, eclampsia, and sepsis. Recent studies indicate that 64% of maternal deaths occur in women aged 20 to 34, 10% in adolescents under 20, and 26% in women over 35 (Viviana et al., 2020).

For these reasons, exploring the relationship between adolescent pregnancy and maternal complications in Latin America and the Caribbean is essential for understanding its impact on regional public health. In this framework, the present study aimed to identify and analyze the main maternal complications associated with adolescent pregnancy through a systematic review focused on the realities of Latin American countries.

Methodology

This research was developed under a qualitative and descriptive approach, following the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) method, which ensured rigor, transparency, and systematicity in the literature review process. This approach was selected for its ability to explore available findings in depth and provide a comprehensive view of the maternal complications linked to adolescent pregnancy in Latin America and the Caribbean.

The literature review was conducted through exhaustive searches in recognized academic databases such as ProQuest, Scopus, and Web of Science. For the initial collection of articles, the search equation used was ((("Maternal complications") AND ("teenage pregnancy") AND ("LAC")), which yielded a preliminary total of 234 documents. From this set, filters were applied to refine the results and obtain a more specific and representative sample.

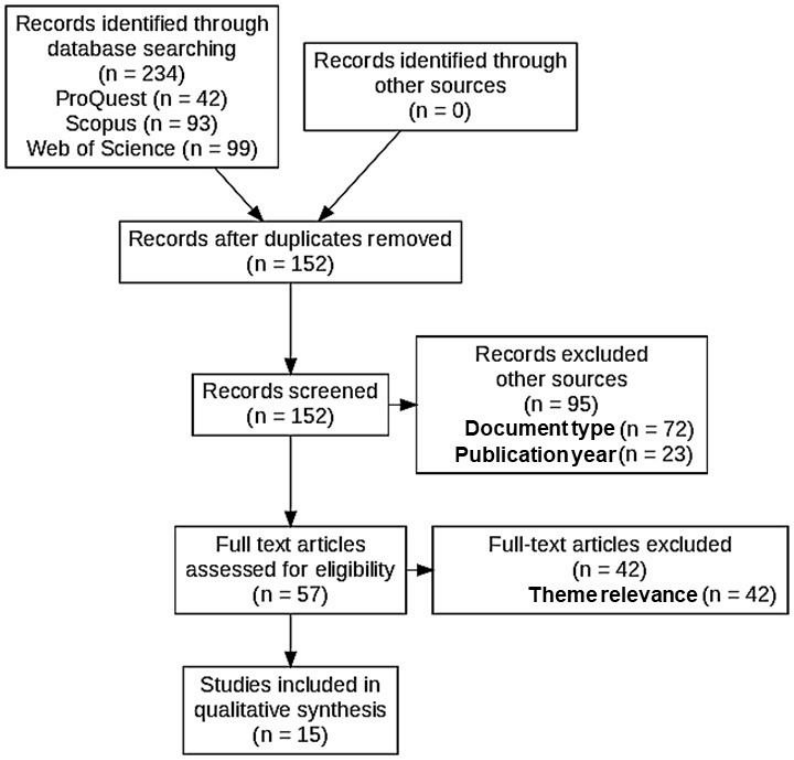
Only publications from the years 2020 to 2024 were included to gather the most recent and updated contributions on the topic. Furthermore, only articles from peer-reviewed scientific journals written in Spanish or English were selected. Documents that presented full access, either online or through academic management platforms like Mendeley, and that contained key terms in the title, abstract, or keywords were prioritized.

Conversely, articles that, despite appearing in the search, did not have a direct relationship with the topic of study or referred to geographical contexts outside of Latin America and the Caribbean were excluded. Duplicate articles were also discarded, as well as those presenting preliminary results without clear conclusions or lacking sufficient theoretical and methodological grounding.

Finally, after applying the described selection and filtering criteria, a final sample of 15 scientific articles was established, which underwent bibliometric analysis and qualitative meta-analysis. This process allowed for the identification of recurring themes, emerging trends, and predominant perspectives among authors regarding maternal complications associated with adolescent pregnancy in the region.

Figure 1

Flow diagram of the study selection process for the systematic review

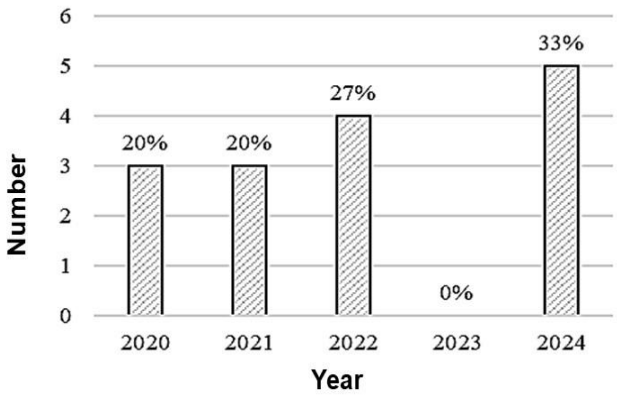


Results and discussion

Figure 2 shows the evolution in the number of scientific articles related to adolescent pregnancy and maternal complications in Latin America and the Caribbean during the period 2020-2024. It is observed that the majority of studies included in the systematic review are concentrated in the most recent years, particularly in 2024. This upward trend reflects a growing interest from the scientific community in addressing this issue, suggesting a greater awareness and prioritization of the topic within the academic sphere of the region.

Figure 2

Annual distribution of scientifi *4)*



In Figure 3, an analysis of the geographical distribution of the included studies is presented. Ecuador and Mexico are highlighted as the countries with the highest representation in the research, followed by Brazil and Peru. This distribution illustrates that, while there is a concentration in certain national contexts, the diversity of countries represented allows for a broader and more contextualized understanding of adolescent pregnancy in the Latin American and Caribbean region.

Figure 3

Geographical distribution of articles included in the systematic review on adolescent pregnancy and maternal complications in Latin America and the Caribbean (2020–2024)

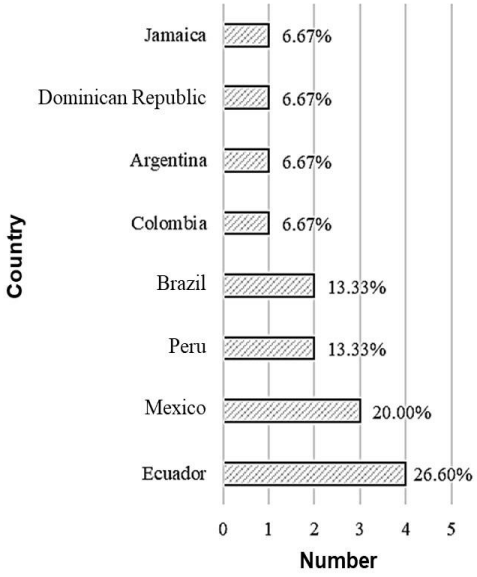


Table 1 provides a detailed summary of the studies included in the systematic review on adolescent pregnancy and maternal complications in Latin America and the Caribbean during the period 2020-2024. This table presents a compilation of authors along with their general conclusions, offering an overview of the findings and recurring themes addressed in the selected studies. The information contained in Table 1 highlights the different approaches and results obtained by researchers, contributing to a deep understanding of the implications of adolescent pregnancy in the region.

Table 1

Summary of studies on adolescent pregnancy and maternal complications in LAC (2020–2024)

No.	Author	General conclusion
1	(Harrison et al., 2024)	This study identified that younger adolescent mothers (<16 years) face unique risks, such as preterm births and elevated depressive symptoms. It also highlights the importance of social support, especially living with parents, for better prenatal care and psychological well-being. Additionally, the study emphasizes psychological challenges like depression and neonatal morbidity, underscoring the urgent need for psychological resources for these adolescents.
2	(González-Rodríguez et al., 2024)	The effects of early adolescent pregnancies on maternal health include complications such as preeclampsia, anemia, and nutritional deficiencies due to late diagnoses, preterm birth, and an increased risk of maternal mortality. 58.1% of births are by cesarean section, increasing risks associated with early pregnancy. The illegality of abortion under any circumstances, along with stigma, discrimination, and lack of knowledge about their rights, leads many girls to resort to unsafe abortion practices.
3	(Sámano et al., 2024)	The Mexican sample showed a higher frequency of overweight and obesity in pregestational body mass index (BMI) categories, although this was not associated with cesarean delivery. It may be linked to a low number of prenatal care visits, as noted in previous studies. This may be explained by inadequate follow-up and insufficient information to identify complications during pregnancy. In adolescents under 15 years, the fetus may be in a disadvantageous position, and the maternal pelvis may not be fully developed, complicating vaginal delivery. Mexican adolescents, due to their younger age and fewer prenatal visits, may have a narrower pelvis than older Colombian women.
4	(Armijos et al., 2024)	Adolescent pregnancy poses a significant public health challenge, as it increases the likelihood of developing various maternal complications. Among the most common are hypertensive disorders, considered the main condition in this age group. Other conditions include urinary infections, anemia, miscarriages, premature rupture of membranes, and hemorrhages, both prenatal and postpartum. This set of complications considerably elevates the risk of morbidity and mortality for both mother and newborn.
5	(Oviedo-Mendoza et al., 2024)	Study results show that pregnant adolescents aged 19 or younger in Latin America have a risk of eclampsia, although these findings should be interpreted with caution. Conversely, no significant risk of preeclampsia or postpartum hemorrhage was observed in this group of adolescents. It is essential for health systems in Latin America and the Caribbean to improve their capacities to detect and adequately manage obstetric complications in adolescents, in addition to promoting sexual and reproductive education to reduce the rate of unplanned adolescent pregnancies.
6	(Suárez-López et al., 2022)	Adolescent mothers and their newborns are at greater risk of experiencing severe adverse outcomes during delivery and in the first week postpartum compared to young mothers, especially adolescents. Focusing on the couple as a whole can facilitate a move towards integrated care that maximizes health benefits for both mother and newborn. Continued efforts are needed to improve health care and prevention initiatives aimed at adolescent women and their newborns in Latin America.
7	(Camargo-Reta et al., 2022)	Perinatal complications in pregnant adolescents may arise from multiple interrelated factors. This study identified higher risk levels in those adolescents who reported alcohol consumption before or during pregnancy, as well as those with previous pregnancy histories. Additionally, the absence or deficiency of prenatal care was significantly associated with the occurrence of these complications, highlighting the importance of timely and continuous medical attention during pregnancy.

8	(Assis et al., 2022)	Although adolescent pregnancy is a social issue and its recurrence is even more complex, analyzing negative maternal and perinatal outcomes shows that primiparous women are the most affected. This is because the group with recurrent pregnancies is older, as it is known that complications reduce considerably after age 16. This does not exclude the importance of promoting the postponement of adolescent pregnancy and preventing its recurrence.
9	(Salazar, 2022)	Adolescent pregnancy has profound repercussions on the psychosocial development of young women, significantly limiting their opportunities for educational and employment access, thereby perpetuating cycles of intergenerational poverty. This situation reflects the urgent need for legislative frameworks that ensure comprehensive protection for adolescents, recognizing their specific rights and needs. Complications associated with pregnancy do not arise solely from medical conditions but are the result of a set of structural factors such as inadequate regulations, discrimination, social exclusion, racism, and persistent barriers to accessing health services. Additionally, the inequality in social and gender relations deepens the vulnerability of this population group.
10	(Romero et al., 2021)	This study represents one of the first efforts in the region to apply a standardized methodology to assess the severity of complications arising from abortion, as well as the experiences of women during health care. Its purpose is to provide evidence to inform the design of public policies and programs centered on rights and sexual and reproductive health. Although most analyzed cases corresponded to mild or moderate complications, the persistent proportion of women facing potentially fatal situations highlights systemic shortcomings and underscores the need to strengthen health services with a human rights and equity focus.
11	(Bruno et al., 2021)	This study found a higher risk of miscarriage and fetal death in pregnant adolescents, possibly due to social vulnerability that leads them to resort to unsafe abortions. A higher incidence of postpartum infections, especially fever in the postpartum period, was also observed, although this result is less emphasized in the literature compared to other complications such as anemia and preeclampsia. The research highlights the need to improve the care and prevention of complications in pregnant adolescents, especially in contexts of social vulnerability.
12	(Paredes & Santa-Cruz-Espinoza, 2021)	Various studies have shown that there are family variables significantly associated with adolescent pregnancy. In the present research, conducted in the Alto Trujillo area of Trujillo, Peru, the main risk factors linked to this issue were evaluated. Findings revealed that among the most relevant factors are exposure to violence, family functionality level, the age at which the adolescent's mother had her first pregnancy, and the parents' relationship status. While the educational level of parents was also identified as a risk factor, its influence was less significant compared to other analyzed elements.
13	(Viviana et al., 2020)	A direct relationship was evidenced between adolescent pregnancy and the occurrence of complications during pregnancy and childbirth. These complications are closely linked to both the biological immaturity of the pregnant individuals and the limited accessibility to prenatal care services. Early identification of risk factors is essential for timely intervention, especially in managing nutritional deficiencies and preventing conditions that could jeopardize maternal and neonatal health.
14	(González-Andrade & Saeteros-Cordero, 2020)	Adolescent mothers show a higher incidence of neonatal morbidity, even in term births (≥37 weeks of gestation) with APGAR scores between 8 and 9 at five minutes. There was also a higher frequency of complications such as respiratory distress and sepsis in newborns, particularly when the pregnant individuals attended fewer than five prenatal check-ups. Conversely, prenatal pathological histories were more prevalent in adult women aged 20 to 34 who attended more than five prenatal consultations. However, pregnant adolescents, especially

		those living in rural areas, tend to have lower adherence to prenatal check-ups, increasing the risk of complications in newborns.
15	(Martinez et al., 2020)	Complications during pregnancy and childbirth are more common in adolescents due to their physical and emotional immaturity, increasing the likelihood of maternal and perinatal mortality. Among the main maternal complications are eclampsia, gestational hypertension, and postpartum hemorrhage. For newborns, the most frequent problems include respiratory issues, infections such as sepsis, and congenital malformations. Additionally, adolescent pregnancy entails a considerable psychological impact, reflected in school dropout, greater vulnerability to disorders like depression and suicide, and a higher likelihood of falling into poverty and creating dysfunctional family environments.

Discussions

In many regions of the world, unwanted pregnancy represents one of the main challenges in the sexual and reproductive health of adolescents. This issue often translates into greater risks for both the mother and the newborn and is a significant contributor to health complications and maternal mortality during pregnancy and childbirth. Among the involved factors are high rates of unplanned pregnancies and abortions among adolescents. In response to this situation, various public policies have begun to recommend long-acting contraceptive methods, such as injections and intrauterine devices, with the aim of reducing the risk of unwanted pregnancies and safeguarding the overall health of adolescents.

The results of this review highlight significant advances, but also persistent challenges regarding adolescent reproductive health in Latin America and the Caribbean. Although the region offers a relatively wide range of contraceptive methods for both married and unmarried adolescents, there remains a significant gap between their availability and effective access, particularly among adolescents in highly vulnerable situations. As noted by Bautista Flores & Tena Hernández (2024), limitations in access to these services are not solely due to a lack of options but are also caused by multiple structural and social barriers that restrict their use, compromising the commitments made by countries at the World Health Assembly.

Regarding access to prenatal care, marked inequalities exist among countries in the region. Recent research indicates that nations like Argentina, Brazil, Chile, and some Caribbean states show better indicators in prenatal coverage, which translates into greater maternal and child protection. In contrast, countries like Bolivia, Peru, Paraguay, Haiti, and Nicaragua report both higher rates of adolescent pregnancy and lower levels of effective access to prenatal health services (Chavaría et al., 2023). Nevertheless, it is noteworthy that in Peru, a sustained trend toward decreasing adolescent pregnancy has been observed over the last few decades, partly attributed to the implementation of more targeted public policies focused on prevention and comprehensive sexual education.

Concerning maternal mortality, data show a general trend toward reduction in most of the analyzed countries since 1990. For example, Bolivia has achieved a significant decrease in its maternal mortality rate, although it still exceeds international standards. Brazil and El Salvador have also shown remarkable progress, reflecting improvements in maternal health service coverage and quality (Tobar & Romio, 2023). However, these positive figures should not obscure the persistent inequalities among countries or the structural challenges in contexts marked by high poverty rates, rurality, and social exclusion.

The differences between maternal mortality in adolescents and in adult women are significant. In Colombia, for instance, it has been documented that 29% of maternal deaths from direct causes and 44% from indirect causes occur in adolescent women. Similarly, a study in Salvador, Bahia, found that maternal mortality in adolescents aged 10 to 19 is 48% higher compared to the 20 to 29 age group. However, a decrease in the mortality rate of adolescent mothers has also been reported, from 262 to 138 deaths per 100,000 live births (Guzmán et al., 2023).

Globally, complications arising from adolescent pregnancy are concentrated among girls aged 10 to 14, and this situation has been recognized for decades as a serious public health issue. According to Gamarra & Pante (2022), the persistence of these complications in Latin America and the Caribbean is linked to structural factors that have yet to be adequately addressed, such as inadequate sexual education, limited access to health

services, sexual violence, the presence of untreated chronic diseases, and other social determinants of health operating at the community, family, and institutional levels.

Moreover, legal disparities regarding access to safe abortion exacerbate the situation. The differences between countries that have regulated this practice and those where it remains prohibited not only reflect legal inequality but also a gap in social protection for adolescents. This situation directly impacts health systems by increasing the number of unwanted pregnancies and late care, contributing to avoidable complications and a greater burden on public services.

In light of this scenario, it is crucial that various disciplines address the phenomenon of adolescent pregnancy with a contextual and proactive perspective. Considering the pregnant adolescent as an individual influenced not only by biological conditions but also by biographical, historical, and structural trajectories—including family, educational, and social factors—allows for the visibility of the diverse experiences, needs, and vulnerabilities that must be considered when designing effective and equitable interventions and public policies.

Conclusions

The literature review on adolescent pregnancy in Latin America and the Caribbean indicates that this phenomenon continues to be a critical and multifactorial challenge affecting both the physical and psychological health of adolescents, as well as their social and economic development. Recent studies agree that adolescent mothers face higher risks of medical complications, such as preeclampsia, anemia, preterm births, and infections, especially in contexts characterized by limited access to health and education services. These risks are exacerbated by sociocultural and economic factors such as poverty, inequality, social exclusion, and lack of comprehensive sexual education, which favor the prevalence of early pregnancies in the region.

Furthermore, family and community support is identified as a relevant protective factor that helps mitigate some of the negative effects of adolescent pregnancy on mental health and overall well-being. However, significant barriers persist to accessing adequate prenatal and psychological care, hindering healthy development and increasing the likelihood of long-term adverse consequences for both adolescent mothers and their children.

The findings point to an urgent need for the implementation of public policies that include comprehensive, accessible, and culturally relevant sexual education programs, as well as public health interventions that ensure access to prenatal care and psychological support services. Addressing adolescent pregnancy in Latin America requires not only improving the availability of health services but also tackling structural inequalities and fostering safe and supportive environments that enable adolescents to make informed decisions about their futures.

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