

ORIGINAL ARTICLE

The influence of religion on the refusal of legal abortion among brazilian women with pregnancy resulting from sexual violence

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Abstract

Background: restrictive Brazilian legislation allows abortion in exceptional cases, such as pregnancy resulting from a sexual crime. However, little is known about women who give up on having an abortion after receiving approval for the procedure.

Objective: to verify the association between religion and abandonment of legal abortion in women with pregnancies resulting from sexual violence.

Methods: cross-sectional study with 941 women with pregnancy due to sexual crime treated at the Pérola Byington Hospital, São Paulo, Brazil, from August 1994 to December 2012. The cases were grouped according to whether or not they gave up on abortion. The study variables were age, education, race/color, marital status, gestational age, religion, aggressor and type of intimidation. Odds Ratio and Wald chi-square test (χ^2) were calculated. Logistic regression adjusted by analyzing the variables with stepwise backward analysis was used. Data analyzed using SPSS15.0 software. Research approved by the Ethics and Research Committee with opinion n° 6767, CAAE n° 00957512.3.0000.5505.

Results: in 92 cases (9.8%) the legal abortion was abandoned and in 849 (90.2%) the abortion was completed. Women who declared religion and who were raped by a known aggressor gave up abortion almost 2.5 times more often (OR=2.46; $p<0.001$). Those who declared they had no religion and had low education were 13 times more likely to give up on abortion (OR=13.23; $p=0.017$). Women without low education and who declared religion were 16 times more likely to give up on abortion (OR=16.32; $p=0.014$). Those who declared having a religion and were victims of known aggressors gave up on abortion 16 times more than those who had no religion (OR=16.32; $p=0.014$).

Conclusion: the results suggest that religious beliefs can influence the abandonment of legal abortion in certain subpopulations of women.

Keywords: sex offenses, legal abortion, induced abortion, religion and medicine.

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Authors summary

Why was this study done?

To verify the impact of religion on the decision-making process for legal abortion in cases of pregnancy resulting from sexual violence.

What did the researchers do and find?

The results suggest that religious belief can influence the decision to give up legal abortion.

What do these findings mean?

Brazilian public health services that perform legal abortions must consider religion as an element that integrates the abortion decision-making process and the possible emotional ambiguities that it may bring to women.

Highlights

Religion and Science have always been conflicting and silent subjects. This article seeks to consider religion as an important element in the decision-making process for legal abortion.

INTRODUCTION

Abortion is considered an important public health problem, particularly in developing countries that have adopted restrictive or prohibitive legislation¹. In Brazil, abortion is not criminalized except in cases where the mother's life is at risk, pregnancy is the result of sexual violence, or in cases of anencephaly². Pregnancy resulting from sexual violence represents a serious violation of human rights and sexual and reproductive rights. As a signatory of the 1999 United Nations General Assembly³, the Brazilian State has the responsibility to promote actions and public policies that guarantee access to legal and safe abortion within the Unified Health System (SUS).

Although abortion in cases of sexual violence has been legally permitted since 1940, Brazilian women still face many obstacles to receiving care. The limited availability of public health services, distributed unevenly across the country, forces many women to resort to clandestine and unsafe abortions, putting their lives at risk or facing health consequences. Some health services also require documents or procedures not required by law, such as the presentation of a court order or a police report, making access to legal abortion difficult⁴.

Even so, in recent decades there has been a significant increase in studies that seek to identify the sociodemographic characteristics of Brazilian women seeking legal abortion, the dynamics of these sexual crimes, aspects related to the aggressors, or the trajectories and critical routes that women face⁴. These studies also indicate that a significant proportion of women do not complete a legal abortion due to advanced gestational age^{5,6}. Evidence suggests that this situation is associated with aggressors known to the victim⁷, situations of incest or intellectual disability⁸, or the young age of the woman⁶.

Few publications address women's decision not to have a legal abortion. It is assumed that known sexual aggressors may play a relevant role in this change of decision, assuming that they somehow end up interfering in the woman's autonomy. Factors such as the woman's age, race/color, her marital status or form of intimidation do not seem to be related to women's decision not to have a legal abortion⁷.

The decision to have a legal abortion should be based on personal values and the conscience of each woman, protected from external moral, political or religious interventions⁹. However, abortion remains a complex issue in the theological field, particularly for the Neo-Pentecostal

Churches and the Catholic Church due to their axiomatic positions in the bioethical field. Motherhood is strongly associated with the beginning of life from conception, as a divine ideal spread notably in Western societies that align with Judeo-Christian principles⁴.

The influence of the Catholic Church in Latin American and Caribbean countries on these issues is significantly greater than in European countries¹⁰. It is acknowledged that conservative and fundamentalist religious positions can have a strong inhibiting effect on the implementation of abortion in public health services¹¹. In an increasingly secularized world, religion has shown less influence on everyday decisions¹⁰. Even so, religions influence people to some extent because they are part of the culture¹².

A study by Blake *et al.* (2015)⁶ shows that the majority of Brazilian women who seek legal abortion declare themselves to be Catholic or Evangelical, indicating that their beliefs were not decisive in their choice. On the other hand, there is evidence that a significant proportion of women with unplanned and unwanted pregnancies do not seek abortion, motivated by religious principles¹². Physicians who declare themselves to be religious were also more likely to not perform or not support women who request abortion, even in legal cases¹³.

Cultural, social, and religious values contribute to ambivalent feelings toward abortion, even in legal cases^{11,12}. The decision to proceed with a pregnancy appears to be influenced by the risk of stigmatization and social rejection, the perception of the identity of the pregnancy and fetus in relation to sexual crime, or exposure to moral and religious judgment⁹. However, there is insufficient data on the influence of a woman's religion in these situations. The aim of this study is to verify the association between a woman's declared religion and her refusal to have a legal abortion in cases of pregnancy resulting from sexual violence.

METHODS

Study design

A cross-sectional epidemiological study with a convenience sample based on primary data collected from patients treated at the Pérola Byington Hospital, São Paulo, Brazil, from August 1994 to December 2012, who claimed pregnancy was the result of sexual violence and requested legal termination of pregnancy. The Pérola

Byington Hospital is a public institution of the São Paulo State Department of Health, recognized by the Ministry of Health as one of the main references in legal abortion care by the Unified Health System (SUS).

Criteria for selection and inclusion of subjects

The study population was divided into two groups. The first group included women who decided not to have an abortion after receiving approval for the procedure. The second group included patients who had a legal abortion. The sexual crime was characterized according to the narrative of the woman or her legal representative, in accordance with articles 213 and 217-A of the Penal Code, Law No. 12,015, which deals with Crimes Against Sexual Dignity. The crime of rape, article 213, considers sexual acts without consent committed with physical violence or serious threat. The crime of rape of a vulnerable person, article 217-A, includes sexual acts against children and adolescents under 14 years of age or against vulnerable people who cannot offer resistance to the aggressor².

The legal abortions performed were based on article 128 of the criminal legislation, Law N°. 2,848. The documentary justification followed Ordinance MS/GM N°. 1,508, of the Ministry of Health. No police report, forensic examination report, sexual intercourse report, or court order were required for inclusion in the study. Sexual crimes against minors under 18 years of age were reported to the Guardianship Council, in accordance with article 13 of Law N°. 8,069 of 1990. Compulsory Notification, Decree-Law 5,099 of 2004, was carried out as of the effective date¹⁴.

Cases that did not receive abortion approval due to gestational age ≥ 23 weeks, pregnancy unrelated to the sexual crime (prior to or subsequent to sexual violence), confirmed cases of false allegations of sexual crime, and cases in which follow-up was lost for an unspecified reason were excluded.

Instruments and analysis of data

The study variables were extracted from a database using Microsoft Excel 2010 software and analyzed using SPSS 15.0 software. The Microsoft Excel database was entered using a pre-coded form that was reviewed at the end of each consultation. Each case included in the database was subjected to an assessment of the consistency of the information by two reviewers. Discrepancies were corrected before transfer to SPSS 15.0 software.

Statistical analysis

Quantitative data were assessed using measures of central tendency and dispersion. Means between the two groups were compared using the Student's t-test. The response variable was dichotomized as (1) Yes, when the abortion was performed, or (0) No, when the abortion was abandoned. The variables were categorized and the existence of an association with the response variable in the univariate analysis was assessed using Pearson's chi-square test (²).-X

The study variables selected were age, education, race/color, marital status, gestational age and religious affiliation. In relation to sexual crimes, the identification of the aggressor (known or unknown), the type of intimidation used in the sexual violence and the location where the crime occurred were considered. Education was classified as low if less than nine years of study. Race/color was classified as black (sum of black and brown) and non-black.

Odds ratios and respective 95% confidence intervals were calculated. Wald chi-square tests (χ^2 W) and their statistical significance (p) were calculated. The significance level adopted was 5%. Logistic regression adjusted by analysis of the study variables was used with the variable of interest defined as the known aggressor. The analysis based on likelihood ratio tests employed the stepwise method backward.

Ethical aspects

Resolutions No. 196/1996 and N°. 466/12 of the National Health Council (CNS) were respected regarding the ethical aspects inherent to conducting research involving human beings. The study did not incorporate any form of patient identification, ensuring confidentiality. The research was approved by the Ethics and Research Committee of the Federal University of São Paulo, Opinion N°. 6767 and CAAE N°. 00957512.3.0000.5505, dated March 9, 2012.

RESULTS

Between 1994 and 2012, 1,236 women were treated for pregnancy resulting from sexual violence. A total of 295 cases (23.8%) were excluded, according to the exclusion criteria. The final sample consisted of 941 cases divided into two groups: 92 women (9.8%) who decided not to have a legal abortion and 849 (90.2%) who underwent the procedure.

Table 1: shows the univariate analysis of the sociodemographic characteristics of the women and the sexual crime, according to whether or not they decided not to have a legal abortion.

	Abortion waiver						RC	IC95%	χ^2w	p
	yes (N=92)		no (N=849)		Total (N=941)					
	n	%	n	%	n	%				
Age < 14 years										
No	81	88.0	776	91.4	857	91.1	1		1.14	0.286
Yes	11	12.0	73	8.6	84	8.9	1.44	0.74 - 2.83		
IG > 12 weeks										
No	46	50.0	496	58.4	542	57.6	1		2.39	0.122

Continuation- Table 1: shows the univariate analysis of the sociodemographic characteristics of the women and the sexual crime, according to whether or not they decided not to have a legal abortion.

	Abortion waiver						RC	IC95%	χ^2w	p
	yes (N=92)		no (N=849)		Total (N=941)					
	n	%	n	%	n	%				
Yes	46	50.0	353	41.6	399	42.4	1.41	0.91 - 2.16		
Low education level										
No	46	50.0	545	64.2	591	62.8	1		7.01	0.008
Yes	46	50.0	304	35.8	350	37.2	1.79	1.16 - 2.76		
Race/Color										
No	79	85.8	745	87.7	824	87.6	1		0.27	0.604
Yes	13	14.2	104	12.3	117	12.4	1.18	0.64 - 2.20		
No union										
No	9	9.8	116	13.7	125	13.3	1		1.07	0.300
Yes	83	90.2	733	86.3	816	86.7	1.46	0.71 - 2.98		
Religion										
No	13	14.1	139	16.4	152	16.2	1		0.31	0.579
Yes	79	85.9	710	83.6	789	83.8	1.19	0.63 - 2.20		
Serious threat										
No	46	50.0	291	34.3	337	35.8	1		8.70	0.003
Yes	46	50.0	558	65.7	604	64.2	0.52	0.39 - 0.80		
Known offender										
No	43	46.7	559	65.8	602	64.0	1		12.66	<0.001
Yes	49	53.3	290	34.2	339	36.0	2.20	1.42 - 3.39		
Residence of the aggressor										
No	81	88.0	803	94.6	884	93.9	1		5.90	0.015
Yes	11	12.0	46	5.4	57	6.0	2.37	1.18 - 4.76		

GA: Gestational Age. Odds Ratio. 95% CI: 95% Confidence Interval. χ^2_w : Wald Chi-square.

Table 1 shows the univariate analysis of the sociodemographic characteristics of the women and the sexual crime, according to whether or not they decided not to have a legal abortion.

The declaration of religion is found in table 2, according to whether or not to give up legal abortion. We did not find any cases of declaration in Judaism, Islam or Candomblé.

Table 2: Religion declared by women with pregnancies resulting from sexual violence according to whether or not they gave up on legal abortion, Hospital Pérola Byington, 1994 - 2012

Religion	Abortion waiver						OR	P*
	yes (N=92)		no (N=849)		Total (N=941)			
	n	%	n	%	n	%		
Catholic	51	55.4	428	50.4	479	50.9	1.22 (0.79-1.88)	0.360
Evangelical	23	25.0	227	26.7	250	26.6	0.91 (0.55-1.49)	0.720
Jehovah's Witness	0	0	8	0.9	8	0.8	-	0.349
Christian (other)	3	3.3	16	1.8	19	2.0	1.75 (0.50-6.13)	0.372
Spiritist	0	0	14	1.6	14	1.5	-	0.214
Umbanda	0	0	1	0.1	1	0.1	-	0.741
Buddhism	0	0	1	0.1	1	0.1	-	0.741
Other	2	2.2	15	1.7	17	1.8	1.23 (0.27-5.48)	0.780
No religion	13	14.1	139	16.4	152	16.2	0.84 (0.45-1.55)	0.578

* Pearson's Chi-square.

Table 3 describes the complete model for odds ratios of the variables of women who decided not to have a legal abortion, after removing the non-significant second-order interactions using the backward procedure and the effects of the variables that were not part of the interactions.

The resulting model after removing the non-significant second-order interactions by the backward

procedure and the effects of the variables that were not part of the interactions. Low education level and the perpetrator being known to the victim were the two variables that showed an increase in the abandonment of legal abortion. In this model, religion was not significant for abandonment of abortion. When the religion variable was removed from the model, education level lost its significance (table 4).

Table 3: Estimation of the variables of the initial model for the odds ratio of the variables, adjusted to a constant age and gestational age

Variables	I estimated	Standard Error	χ^2	gl	p	Odds Ratio (OR)	95% CI for OR
Unknown assailant	-0.543	0.268	4.10	1	0.43	0.58	0.34 - 0.98
Education	0.425	0.247	2.95	1	0.086	1.53	0.94 - 2.48
Rape of vulnerable people	0.134	0.199	0.45	1	0.502	1.14	0.77 - 1.70
Serious threat	-0.305	0.256	1.42	1	0.234	0.74	0.45 - 1.22
Residence of the aggressor	0.442	0.383	1.33	1	0.248	1.56	0.73 - 3.30
Religion	0.459	0.326	1.98	1	0.159	1,583	0.84 - 2.99
Race/color	0.150	0.325	0.21	1	0.644	1,162	0.61 - 2.19
Marital status	-0.271	0.387	0.49	1	0.483	0.762	0.36 - 1.63
Gestational age	0.022	0.025	0.74	1	0.390	1.02	0.98 - 1.08
Age	0.024	0.016	2.12	1	0.145	1.02	0.99 - 1.06
Constant	-3,174	0.653	23.6	1	<0.001		

Table 4: Estimation of model variables for the odds ratio of variables adjusted to a constant age and gestational age

Variables	I estimated	Standard Error	χ^2	gl	p	Odds Ratio (OR)	95% CI for OR
Unknown assailant	-0.747	0.241	9.56	1	0.002	0.474	0.29 - 0.76
Education	0.484	0.240	4.07	1	0.044	1,623	1.01 - 2.59
Religion	0.438	0.324	1.83	1	0.177	1.55	0.82 - 2.92
Gestational age	0.027	0.025	1.09	1	0.274	1.03	0.98 - 1.08
Age	0.015	0.015	1.06	1	0.304	1.01	0.98 - 1.04
Constant	-5,200	1,216	18.2	1	<0.001		

Table 5: Estimation of the variables of the initial model without religion for the odds ratio of the variables adjusted to a constant age and gestational age

Variables	I estimated	Standard Error	χ^2	gl	p	Odds Ratio (OR)	95% CI for OR
Unknown assailant	-0.716	0.241	8.83	1	0.003	0.489	0.30 - 0.78
Education	0.436	0.238	3.36	1	0.067	1,547	0.97 - 2.46
Gestational age	0.025	0.025	0.98	1	0.322	1.03	0.98 - 1.08
Age	0.015	0.015	1.01	1	0.313	1.01	0.98 - 1.04
Constant	-5,200	1,216	18.2	1	<0.001		

According to table 5, we calculated the second-order interactions between having religion and education and having religion and known author. Both interactions were highly significant, indicating that having or not having religion modifies the behavior of these subpopulations.

Table 6: Estimate of the variables of the final model for the odds ratio of significant variables adjusted to a constant age and gestational age

Variables	l estimated	Standard Error	χ^2	gl	p	Odds Ratio (OR)	95% CI for OR
Unknown assailant	0.472	0.623	0.58	1	0.448	1.60	0.47 - 5.44
Education	2,586	1,081	5.73	1	0.017*	13.23	1.60 - 110.35
Religion	2,792	1,139	6.02	1	0.014*	16.32	1.75 - 152.00
Religion*Education	-2,307	1,109	4.33	1	0.037*	0.10	0.01 - 0.88
Unknown*Religion	-1,374	0.664	4.28	1	0.038*	0.25	0.07 - 0.93
Gestational age	0.026	0.025	1.09	1	0.295	1.03	0.98 - 1.08
Age	0.014	0.015	0.82	1	0.366	1.01	0.98 - 1.04
Constant	-5,200	1,216	18.2	1	<0.001		

Religion significantly influenced the decision to have an abortion (table 7). Women who declared a religion and who were assaulted by a known aggressor were almost 2.5 times more likely to have an abortion (RC=2.46; $p < 0.001$). Women who declared no religion and had low education were 13 times more likely to have an abortion

Table 6 presents the odds ratios for subpopulations according to the religion variable. Both interactions were significant, indicating that having or not having religion changes the behavior of these subpopulations.

(RC=13.23; $p = 0.017$). Women without low education and who declared a religion were 16 times more likely to have an abortion (RC=16.32; $p = 0.014$). Women who declared a religion and were victims of known aggressors were 16 times more likely to have an abortion than those who had no religion (RC=16.32; $p = 0.014$).

Table 7: Estimated odds ratios for giving up abortion in women with pregnancies resulting from sexual violence in the final model in subpopulations by declared religion, type of aggressor and level of education

Subpopulation	Odds Ratio	Reason for Chance (OR)	IC 95% RC	χ^2_w	gl	p
Religion yes	Low / high education level	1.32	0.80 - 2.19	1.67	1	0.280
Religion yes	Known/unknown perpetrator	2.46	1.49 - 4.07	12.43	1	<0.001*
Religion no	Low / high education level	13.23	1.60 - 110.35	5.73	1	0.017*
Religion no	Known/unknown perpetrator	0.62	0.18 - 2.11	0.58	1	0.448
Low education level	Religion yes / no	1.63	0.67 - 3.97	1.13	1	0.287
High level of education	Religion yes / no	16.32	1.75 - 152.00	6.02	1	0.014*
Unknown assailant	Religion yes / no	4.13	0.55 - 31.34	1.88	1	0.170
Known offender	Religion yes / no	16.32	1.75 - 152.00	6.02	1	0.014*

DISCUSSION

Currently, Brazil has one of the most restrictive laws regarding abortion. And, despite being authorized by law since 1940, in cases of pregnancy resulting from rape and risk to the life of the pregnant woman. In recent years, there have been several proposals and initiatives that restrict access to the procedure even when it is permitted.

The negative impact of religious dogmatism on laws and policies in the field of sexuality raises strong demands to restore the principles of secularity and laicity¹⁵.

Conservative sectors, in alliance with the Catholic Church and other religions, continue to create barriers to the safe performance of contraceptive and abortion practices for women's health and legal status. Elections, especially

majoritarian ones, have been moments of fragility for the field of reproductive rights throughout Latin America. In these electoral processes, conservative sectors, especially the Catholic Church, seek to pressure left-wing political forces and try to prevent votes from being cast for candidates committed to the field of reproductive rights.

Souza and Adesse (2005)¹⁶ demonstrate how the influence of a candidate's religion can restrict women's rights and decisions. And, despite being guaranteed by the Federal Constitution, the State fails to exercise its secularism. The lack of respect also extends to judges, who are not prevented from using personal beliefs in their positioning and judgment of cases of violence. Different cultural, religious and social values contribute

to ambivalent feelings and positions on abortion, making the decision-making process difficult and problematic for women¹³.

Society's positions and understandings about abortion have changed throughout history, and religions have been affected by this process. Despite their similarities or divergent teachings, all religions show concern about the issue of abortion and some of them understand it as morally possible in certain circumstances.

Drezzet *et al.* (2022)¹⁷ in a systematic review briefly summarizes the position of religions regarding abortion and its implications for health professionals.

In the first six centuries of Christianity there are few references to abortion, a topic that was not very controversial until the end of the 19th century¹².

The central element of the Catholic Church becomes the sacredness of life and the personhood of the embryo as an absolute and intangible principle. In the conservative conception, life is sacralized in such a way that it ceases to belong to the individual, not allowing him or her to make decisions about it¹⁸.

The excommunication of women and those who collaborate with abortion was recognized by the canonical codes of 1917 and 1983, revealing severity by not equally penalizing homicide¹². According to Melo (2006)¹⁹, the risk of excommunication is known by 60% of Catholic women who resorted to abortion in Colombia. However, 65% of them did not consider abortion as serious a sin as the Catholic Church and 82% believed that God would understand their reasons and would not punish them. Furthermore, 84% of women said they received absolution from a Catholic priest when confessing to the abortion. In our study, it is possible that Catholic women, approximately half of the cases studied, may have resorted to legal abortion based on a similar perspective¹⁹. According to Torres *et. al* (2024)²⁰, among women assaulted by their intimate partner, belief was not an obstacle to resorting to abortion, however, it is not possible to relate this finding to the abandonment of abortion observed in the present study, that Catholic women, about half of the cases studied, may have resorted to legal abortion based on a perspective similar to absolution.

Evangelical religions have different positions and some are flexible in relation to abortion, although the predominant position is traditional and oppositional. Differences in attitudes towards abortion arise from varying beliefs about when life begins and circumstances in which abortion may be morally acceptable²¹.

Protestants also hold life sacred and strongly object to abortion, although they do not recognize the same level of rights for the fetus that they do for the woman¹². In the 1970s, major Protestant denominations in the United States supported the idea of women's freedom of conscience in difficult decisions regarding unwanted pregnancies. However, they are currently assuming increasing conservative political participation in the sense of restricting access to abortion²².

For Judaism, abortion is justified in some cases, such as when there is a risk of death to the woman.

Almost all Muslim teachings, following Aristotle's thought, consider the incorporation of the soul around 120

days of gestation, prohibit abortion after this period, but admit its possibility at any time if there is a risk of death for the pregnant woman. In classical Islam there are divergent positions on abortion. While the Zaydi and Hanbali teachings accept abortion under certain conditions, the Maliki, Zahiri, Ibadiyya and Imamiyya schools prohibit it unconditionally²³.

Traditional Hindu teachings have made abortion possible in India since the 1970s, permitted in cases of sexual violence and to protect women's health, without significant religious opposition²⁴.

Buddhism is not organized around a central authority, so teachings and practices may differ from country to country. Like Hinduism, it believes in the transfer of the soul to subsequent lives. Buddhist writings do not contain any references to abortion, but it is presumed that it is disapproved of based on the philosophy of continuity of life²⁵.

Religious positions interact, to varying degrees, with women's values associated with abortion in different societies. A study of American women shows that attitudes and positions against legal abortion were more frequent among those with no history of abortion, who were married, who did not use contraception, and who considered themselves religious²⁶. The influence of religion on American women's daily decisions indicates that 57% believe that religion is very important, with evangelicals (77%) more inclined than Catholics (46%) or Protestants (44%)²⁷.

Women who understand abortion as a moral issue are more likely to continue their pregnancy, while women who treat the choice as a personal matter seek abortion more often. Religious and moral aspects related to abortion are predominant in women's decision-making²⁸. Religious beliefs play a complex role in the experiences of women seeking abortion, often reinforcing patriarchal aspects of sexuality and reproduction²⁹.

It is accepted that women who become pregnant as a result of sexual violence have legitimate reasons to seek legal abortion, based on their rejection of the forced and unwanted pregnancy or the violation of their right to choose motherhood³⁰. In these cases, religion may end up playing an ambiguous role. While many women find relief and comfort in religion when experiencing the trauma of sexual violence, most do not receive support, understanding or empathy from religion when they need a legal abortion³¹.

Religious values also have a strong influence on healthcare management and the positioning of its professionals. Hospitals that declare themselves "Catholic" refuse to provide abortion services, referring to the document Ethical and Religious Directives for Catholic Health Care Services^{32,33}.

While some of these hospitals tolerate doctors referring women to another institution, others discourage or prohibit the provision of this information, contrary to ethical guidelines³⁴.

In Brazil, religion can be relevant both for women who seek legal abortion and for the health professionals who assist them. According to Drezzet *et al.*, (2022)¹⁷, the subjects' connection with religion has been shown

to influence markedly opposing or restrictive positions and practices regarding induced abortion, even when permitted by law. Osis *et al.* (2013)¹³ found that 62.8% of gynecologists who declare themselves Catholic state that they would not help women in clandestine abortions and that 41.7% would refuse to perform legal abortions. Similar behavior is described by Bento *et al.* (2019)³⁵ among resident physicians, with conservative positions on abortion associated with religious values. A study by Madeiro *et al.* (2016)³⁶, interviewing medical students, indicates that 50.8% would refuse to perform a legal abortion in cases of rape, 41.6% would declare conscientious objection in cases of anencephaly, and 13.2% would refuse to perform an abortion when there was a risk of death for the pregnant woman. The authors found religion to be the only element that would motivate these behaviors³⁶. Legal operators are also influenced by religion. For 30.6% of prosecutors and judges who declare themselves to be religious, the legislation on abortion should be maintained, while 24.6% are in favor of even more restrictive laws³⁷.

There are similar reports in other countries. In Mexico, a survey of university students found that students who declared themselves to be Catholic or Christian were more likely to condemn abortion, and that this was the group that least considered decriminalizing abortion as a way to reduce maternal deaths³⁸. In Israel, religious nurses and nursing students had the most negative views on abortion³⁹. In the United States, a study of physicians providing reproductive care showed that greater support for legal abortion was associated with professionals without religious affiliation⁴⁰.

In this study, when we analyzed the interactions between education and religion, we observed that declaring religion is not a factor that interacts with low education to increase the chance of giving up abortion. However, women with little education who declared no religion were thirteen times more likely to give up abortion.

Our results indicate that half of the women who decided not to have an abortion had a low level of education, consistent with the 2018 United Nations report, in which Brazil appears with an average level of education of 7.8 years⁴¹. In Brazil, higher rates of induced abortion are reported for women with low levels of education. The 2016 National Abortion Survey indicates that 38% of Brazilian women who resort to clandestine abortions are under nine years old^{40,42}. On the other hand, women with more education and who declared their religion were among those who most gave up on legal abortion. It is possible that in this subpopulation there is a convergence of social and economic factors that results in greater adherence to religious principles.

The issue of known sexual aggressors also arises in our results regarding the interaction with religion in subpopulations. In fact, levels of tolerance among religions regarding violence against women are known. Many of them promote their submission, whether in their discourse, in the interpretation of sacred texts, or in discriminatory sexist practices⁴. This condescending position is clear in relationships with intimate partners. Women who suffered physical violence from their husbands and who sought support from religion were those who most often

remained in abusive and violent relationships²⁰⁻⁴³. Brazilian evangelical women suffer more physical and psychological violence in marriage than Catholic women²⁰⁻⁴⁴. In India, women who claim to follow Christianity have been shown to have a lower risk of experiencing intimate partner violence⁴⁵. In Iraq, a cross-sectional study found a higher prevalence of physical, sexual and psychological intimate partner violence among Muslim women²⁰⁻⁴⁶.

In our results, women who declared their religion and who suffered sexual violence by known aggressors were 16 times more likely to give up on abortion. Feelings of shame and humiliation are associated with the idea of guilt on the part of the woman, which can result in giving up on abortion²⁷. Studies suggest that the greater vulnerability of younger women, those with no income and little education ends up being an obstacle⁴⁷. However, in our study, women with no low education and who declared their religion were 16 times more likely to give up on abortion. Furthermore, when the aggressor is part of the family, evidence indicates that women's access to legal abortion is impaired^{6,8}. Known aggressors who use threats seem to exert some influence in these cases, possibly delaying the search for legal abortion⁴⁷.

The results of this study may contribute to the understanding of the phenomenon of forced pregnancy and legal abortion, issues relevant to public health. We consider the originality and documentary aspect of this study to be strengths, but its limitations should be noted. Catholic and Evangelical religions are predominant in the Brazilian population, which does not allow generalization of the results to other social and cultural contexts. Furthermore, religion was analyzed based on the woman's declaration, and due to the limitation of the convenience sample, it is not possible to know to what extent religious belief may guide women's values regarding abortion. We recognize the need for other studies with different designs, including qualitative ones, that address the topic.

CONCLUSION

Most women with pregnancies resulting from sexual violence who seek legal abortion declare some religion. However, our results suggest that religious belief may influence the decision to forgo legal abortion among specific groups of women, particularly those sexually abused by known aggressors and women with higher levels of education. On the other hand, we found that not having a religion significantly increased the chances of forgoing abortion among women with little education.

Brazilian public health services that perform legal abortions must consider religion as an element that is part of the abortion decision-making process and the possible emotional ambiguities that it may bring to women.

Author Contributions

RMMP, JD, and RSS developed the research question. SA, and RSS performed the statistical analysis. RMMP, SA, JD, HMJ, and RSS interpreted the results. RMMP, JD, HMJ, and RSS provided the tables. RMMP, JD, and RSS drafted the manuscript. RMMP, JD, and RSS have reviewed and approved the manuscript. All authors read and approved the final manuscript.

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Conflicts of Interest

No potential conflict of interest was reported by the authors.

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Resumo

Introdução: a restritiva legislação brasileira permite o aborto em casos excepcionais, como na gravidez que decorre de crime sexual. Entretanto, pouco se conhece sobre as mulheres que desistem de realizar o aborto após receber aprovação do procedimento.

Objetivo: verificar a associação entre religião e desistência do aborto legal em mulheres com gravidez decorrente de violência sexual.

Método: trata-se de um estudo com 941 mulheres com gravidez por crime sexual atendidas no Hospital Pérola Byington, São Paulo, Brasil, de agosto de 1994 a dezembro de 2012. Os casos foram agrupados segundo desistir ou não do aborto. As variáveis de estudo foram idade, escolaridade, raça/cor, situação conjugal, idade gestacional, religião, agressor e tipo de intimidação. Foram calculadas as razões de chances e teste de qui-quadrado de Wald (χ^2_W). Foi empregada a regressão logística ajustada por análise das variáveis com stepwise backward. Dados analisados em software SPSS15.0. Pesquisa aprovada por Comitê de Ética e Pesquisa com parecer nº 6767, CAAE nº 00957512.3.0000.5505.

Resultado: em 92 casos (9,8%) ocorreu desistência do aborto legal e em 849 (90,2%) o aborto foi concluído. Mulheres que declararam religião e que foram violentadas por agressor conhecido desistiram quase 2,5 vezes mais do aborto ($RC=2,46$; $p<0,001$). As que declararam não ter religião e apresentaram baixa escolaridade apresentaram chance 13 vezes maior de desistir do aborto ($RC=13,23$; $p=0,017$). Mulheres sem baixa escolaridade e que declararam religião apresentaram chance 16 vezes maior de desistir do aborto ($RC=16,32$; $p=0,014$). Aquelas que declararam ter religião e foram vítimas de agressores conhecidos desistiram do abortamento 16 vezes mais do que as que não possuíam religião ($RC=16,32$; $p=0,014$).

Conclusão: os resultados sugerem que crenças religiosas podem influenciar na desistência do aborto legal em determinadas subpopulações de mulheres.

Palavras-chave: violência sexual, aborto legal, aborto induzido, religião e medicina.

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