goals entered any of the corresponding hierarchical regression analyses; hence, only the first step of each model is presented. Compared with teenagers who did not perceive pregnancy as an impediment to achieving goals, those who did so had elevated likelihoods of having used a contraceptive at last sexual intercourse (odds ratio, 2.3), intending to avoid getting pregnant (9.6), planning to have an abortion if they get pregnant (8.7) and planning to use a prescription contraceptive (2.1); they also scored higher on the pregnancy avoidance index (t value, 9.2).

The proportions of teenagers reporting each pregnancy avoidance measure were similar regardless of whether they had educational or vocational goals (Table 3). In both groups, considering pregnancy an impediment to achieving goals was associated with increased likelihoods of intending to avoid pregnancy (odds ratios, 8.8–13.8), planning to have an abortion if pregnant (8.3–8.5) and planning to use a prescription contraceptive (1.9–3.8), and with scoring higher on the pregnancy avoidance index (t values, 5.2–7.7). Those who had goals also had elevated odds of having used a contraceptive at last intercourse (odds ratio, 2.2). Among teenagers who did not consider pregnancy to be an impediment to achieving their goals, about a quarter intended to avoid getting pregnant, whereas more than three-quarters of those who perceived it to be an impediment intended to avoid pregnancy, regardless of whether they had goals.

DISCUSSION
Our findings support both of the study’s hypotheses: Half of the teenage women with educational or vocational goals did not believe that getting pregnant would make it harder to achieve them, and having goals was not an independent predictor of any of the outcomes. It is of interest, however, that at the bivariate level, teenagers with goals were more likely than those without goals to have used a contraceptive the last time they had sexual intercourse. Contraceptive use at last intercourse may represent an isolated instance of pregnancy avoidance activity in this cohort of inadequate contraceptive users. Thus, whereas the pregnancy avoidance attitudes that we studied may reflect the intent to avoid pregnancy because of its potential to interfere with one’s goals, recent method use may be indicative of the desire to avoid pregnancy at a particular moment for an immediate reason.

Results of epidemiological studies support our findings by demonstrating that assets, such as having conventional goals and being attached to conventional institutions, do not discourage teenagers from becoming pregnant in communities where prevention of early childbearing is not the norm.14–18,36,37 Our findings extend this observation by showing that formulating conventional educational and vocational plans is not associated with pregnancy avoidance attitudes during adolescence unless goal achievement is explicitly linked to pregnancy prevention.

Within this context, it is notable that regarding pregnancy as an impediment was associated with elevated likelihoods that teenagers would endorse most of the pregnancy avoidance measures we studied, whether or not they had educational or vocational goals. Clearly, our definition of goals was too restrictive. Further investigation of why teenage women who did not meet our definition of having goals considered pregnancy to be an impediment would be of interest. However, even without this information, our findings suggest that encouraging teenagers to formulate future-oriented educational and vocational goals may be less important than ensuring that they have concrete, personally relevant reasons to believe that childbearing during adolescence is a threat to what they want most for themselves. In practical terms, this may mean that parents, teachers and prevention interventions should focus on helping female teenagers understand why they may want to postpone childbearing.

Yet this suggestion is speculative. No studies have shown whether it is possible to foster negative expectations about the impact of childbearing, particularly among teenagers who have no such expectations because they grew up in communities where the opportunity costs of teenage pregnancy and parenthood are low. In addition, it is unknown if a decrease in the perceived benefits or an increase in the perceived costs of becoming a parent influences teenagers enough to motivate the behaviors necessary to avoid teenage pregnancy in communities where it is endemic.

Limitations
The major limitations of this study were its reliance on self-reported, cross-sectional data and its focus on a socio-economically disadvantaged group of teenagers who were