

“A Study To Determine The Knowledge And Attitude Of Married Women In The Reproductive Age Group Regarding Emergency Contraception In Selected Rural Areas of Kanpur.”

Author Name

Mrs. Shubha, professor of Child Health Nursing, Saaii college of medical and technology (U.P).¹

Ms. Sharil John, M.Sc (N) Obstetric and Gynaecology, Saaii college of medical and technology (U.P).²

ABSTRACT

Women have right to decide freely and responsibly the number, spacing and timing of their children. Emergency contraception occupies a unique position in the range of family planning methods currently available to women. Emergency contraceptives enable women to prevent pregnancies after they have an unprotected sex. Thus, it averts unplanned and unintended pregnancies, which in turn, reduced unsafe abortion women resort to for unwanted pregnancies. Emergency contraception therefore is an element of reproductive choice for women in a situation where women may have little control over their sexual lives.

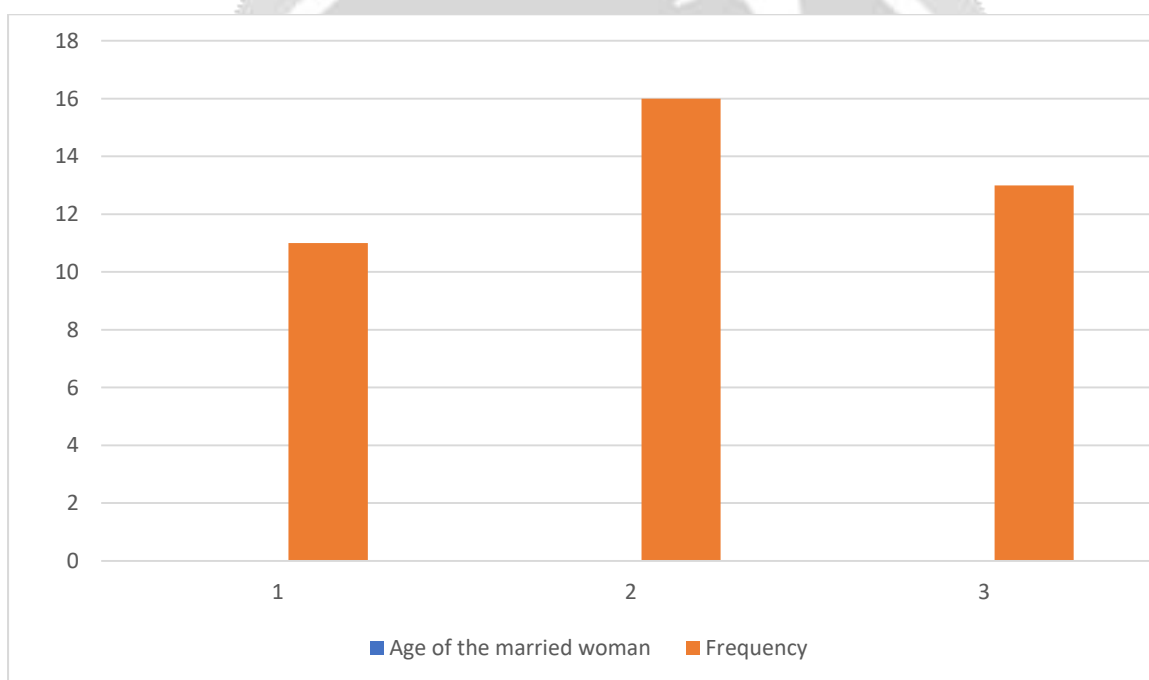
Keywords: knowledge, married women, reproductive age, emergency contraception, rural areas

INTRODUCTION

Women have right to decide freely and responsibly the number, spacing and timing of their children. Emergency contraception occupies a unique position in the range of family planning methods currently available to women. Emergency contraceptives enable women to prevent pregnancies after they have an unprotected sex .Thus it averts unplanned and unintended pregnancies, which in turn, reduced unsafe abortion women resort to for unwanted pregnancies. Emergency contraception therefore is an element of reproductive choice for women in a situation where women may have little control over their sexual lives.Immediate newborn care but are also associated with maternal health and nutritional status priorto and during pregnancy as well as with the quality and timeliness of care the pregnant woman receivesin pregnancy and birth.

Table 1 : Association of knowledge score on Emergency contraception and number of children of married woman.

S. No.	Demographic Variable Age of the married woman	Frequency	Chi Square	df	Inference
1	15-25 y	11	2.98	02	5.99 P < 0.05
2	26-35 y	16			
3	36-45 y	13			



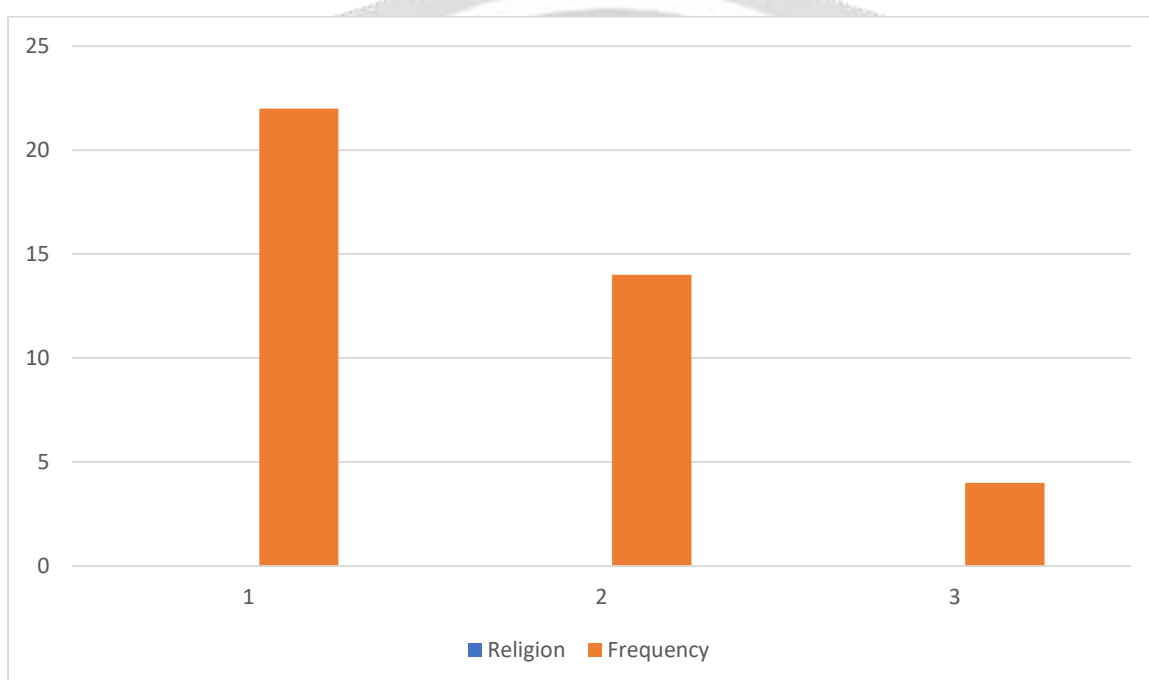
χ^2 (2) at 5.99, NS-Non significant

Table shows that, there was not significant association between Age and knowledge score on emergency contraception of married women as calculated of value (2.98) is lower that table value at 0.05 interval of 2 which is 5.99.

Hence, the hypothesis was rejected

Table 2 : Association of knowledge score on Emergency contraception and Religion of married woman.

S. No.	Demographic Variable Religion	Frequency	Chi Square	df	Inference
1	Hindu	22	1.23	02	5.99 P< 0.05
2	Muslim	14			
3	Christian	4			



χ^2 (2) at 5.99, NS-Non significant

Table shows that, there was not significant association between Religion and knowledge score on emergency contraception of married women as calculated of value (1.23) is lower that table value at 0.05 interval of 2 which is 5.99.

Hence, the hypothesis was rejected

CONCLUSION

The high knowledge on contraceptives did not match with the high contraceptive practice in the study area. The study demonstrates that mere physical access (proximity to clinics for family planning) and awareness of contraceptives are not sufficient to ensure that contraceptive needs are met. Thus, projects aiming at increasing contraceptive use should contemplate and establish better counseling about contraceptive side effects and method switch. Furthermore, in all family planning activities both wives' and husbands' participation should be considered.

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