

TO ASSESS THE KNOWLEDGE, ATTITUDE AND PRACTICES OF THE WOMEN WITH REGARD TO CONTRACEPTION

Prof. Jessica Josline

Department of OBG, HKES College of Nursing Gulbarga, Karnataka

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ABSTRACT

INTRODUCTION

The rampant population growth has been viewed as the greatest single obstacle to the economic & social advancement of the majority of people in India. Some of the main reasons for population explosion in India are illiteracy, ignorance, early marriages, low standard of living, domination by the in-laws, religious beliefs, preference for the male child and myths regarding contraceptive methods.

NEED:

According to the Indian census women in 15-49 yrs of age are around 15% in the population. This age group is the reproductive age group. There are around 168 million eligible in our country. A woman who marries at 15 yrs and lives till 45yrs with her husband is exposed to the risk of pregnancy for 30 yrs and can give birth to 15 children.

High parity is the one of the most important causes for increased maternal, perinatal and infant mortality (Dutta D C 2000) Maternal mortality is due to various reasons such as lack of utilization of contraceptives, high parity, poor nutrition, abortion, unwanted pregnancy etc. it can be prevented by motivating the mothers towards contraception.

STATEMENT OF THE PROBLEM:

A study to assess the knowledge, attitude and practices of the women with regard to contraception, in selected urban and rural areas of Raichur, Karnataka .

OBJECTIVES:

- To assess the knowledge, attitude and practices of women regarding contraception.

- To analyses the relationship between the knowledge attitude and practices of women with regard to contraception and selected variables.
- To describe the relationship among the knowledge attitude and practices of women with regard to contraception.

HYPOTHESES:

- 1) **H₁ – H₆:** there will be a significant relationship between the knowledge of women with regard to contraception and select variables (such as age H₁, religion H₂, education H₃, occupation H₄ and Area H₅).
- 2) **H₇ – H₁₁:** there will be a significant relationship between the attitude of the women with regard to contraception & selected variables such as (age H₇, religion H₈, education H₉ occupation H₁₀ and area H₁₁).
- 3) **H₁₂ – H₁₆:** there will be a significant relationship between the practices the women's with regard to contraception and selected variables such as (age, religion, education, occupation and (area H₁₂, religion, H₁₃, education H₁₄ occupation H₁₅ and area H₁₆).

CONCEPTUAL FRAME WORK:

Conceptual frame work was based on modified pender and palank model (1990-1991) of variables influencing health belief and practices.

METHODOLOGY:

Research approach was descriptive method, which is exploratory in nature was found to be the suitable one. Hence, descriptive correlation design was selected. Sample size 150, 75 women from urban area & 75 women from rural area of Raichur. Sampling technique was cluster sampling method. Data collection was done by using questionnaire method for assessing knowledge of women with regard to contraception, likert scale used for assessing the attitude of women with regard to contraception and checklist to observe the practices of women with regard to contraception.

INCLUSION CRITERIA: Study includes the women who,

- 1) were married
- 2) were in 20-50 yrs of age

- 3) living in ward III (urban) and Yeragera village (rural)of Raichur Karnataka
- 4) can read & write kannada and English language
- 5) Belonged to Hindu, Muslim or Christian.
- 6) Willing to participate in the study.
- 7) Present at the time of data collection.

EXCLUSION CRITERIA: Women, who are,

- 1) not married
- 2) below 18 and above 50
- 3) not living in ward III and Yeragera village of Raichur Karnataka.

DATA ANALYSIS:

Data analysis was done by using descriptive and inferential statistics.

RESULTS :

- 1) Out of 150 respondents, majority (86 i.e. 57.32%) belongs to 20-30years of age group and least were below 20 years (6 i.e.4%)
- 2) Equal numbers of respondents (50 i.e. 33.33%) were in all the three religions i.e. Hindu, Muslim and Christian.
- 3) Regarding education, almost all the respondents were equally distributed in different educational levels like PUC (33 i.e. 22%) Graduates (32 i.e. 21.33%), Middle school (31 i.e.20.66%) and Primary (30 i.e. 20%) comparatively less respondents were with High schools education (24 i.e. 16%).
- 4) Nearly two third of the respondents were housewives (97 i.e.64.67%).
- 5) Equal numbers of respondents were presented in urban and rural areas (75 i.e. 50%)
- 6) Majority of the respondents had good knowledge and positive attitude regarding contraception.
- 7) The finding of the study also revealed that, 61 respondents (40.66%) were using temporary method, 52(34.66%) of respondents adopted permanent

- method and 37 (24.66%) did not use any of the contraceptive methods at the time of data collection.
- 8) Among the 61 respondents who were using temporary contraceptive methods, majority of them were using copper-T(22 i.e. 36.06%) followed by condom (20 i.e. 32.78%) oral pills (14 i.e. 22.99%) and very less number of respondents were practicing safe period (4 i.e.6.65%) and hormonal injections (1 i.e. 1.63%) no single women had used jellies, creams, vaginal tablets and abstinence at the time of data collection.
 - 9) Among the 52 respondents, 51(98.07%) underwent tubectomy and only 1(1.92%) underwent vasectomy. It was seen that vasectomy was least practiced.
 - 10) The mean scores of knowledge with regard to contraception was highest for the respondents who were below 20 years ($x=39.33$, $S.D=6.79$),Hindus and Christians ($x=39.78$, $S.D=9.16$, $x=39.22$, $S.D= 8.73$ respectively),with graduate education ($x=42.78$ $S.D 8.37$) employed ($x=40.41$, $S.D=7.66$) and residents of urban area ($x=40.86$, $S.D=9.61$).
 - 11) The mean score of attitude with regard to contraception was highest for respondents of 30-40 years and below 20 years if age ($x=15.67$, $S.D=3.09$, $x=15.16$ $S.D=2.54$ respectively), Hindus and Christians ($x=15.8$, $S.D=2.77$, $x=15.02$, $S.D=3.43$ respectively), with graduate education ($x=17.34$, $S.D=3.12$) employed ($x=15.62$, $S.D=2.97$) and urban respondents ($x=16.41$, $S.D=3.11$)
 - 12) The respondents belonged to 30-40 years of age group ($x=5.63$, $S.D=2.68$) Hindu religion ($x=5.84$, $S.D=2.38$) with graduate education ($x=5.86$, $S.D=2.48$) and the residents of urban area ($x=6.12$, $S.D=2.14$) scored the highest mean score for practices with regard to contraception.
 - 13) There was a significant relationship between knowledge of women with regard to contraception and their religion ($x^2 =21.98$), education, ($x^2=33.79$),occupation ($x^2=7.49$) and area ($x^2=19.87$),hence the research hypotheses H_2 , H_3 , H_4 and H_5 were retained.

- 14) There was a significant relationship between attitude of women with regard to contraception and their religion ($\chi^2=8.076$), education ($\chi^2=16.07$) and area ($\chi^2=7.70$) therefore the research hypotheses H_7 , H_8 and H_{10} were retained.
- 15) Significant relationship was existing between the practices of women with regard to contraception and their religion ($\chi^2=49.24$) education ($\chi^2=16.49$), occupation ($\chi^2=4.04$) and areas ($\chi^2=14.61$) hence the research hypotheses H_{12} , H_{13} , H_{14} , and H_{15} were retained.
- 16) There was a low positive correlation between knowledge and attitude ($r=0.3167$) knowledge and practice ($r=0.2032$) and attitude and practice ($r=0.0468$).

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