

가 (Alder, 1979).

가 (Haukins, 1995).

가 (Ory, Forrest, & Lincoln, 1983).

가 (Silverman, 1987).

(Janet, 1993).

(Zabin, Stark, & Emerson, 1991).

Mosher(1990)

가 (Burger & Indebitzen, 1985), 가

(Stotrand, 1994).

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(preconception) (bracketing)

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가 (, 1991).

(Oiler, 1982; Omery, 1983).

가 가 (Davis, 1978; Oiler, 1982; Parse, 1981; Watson, 1979).
(, 1993;
Spiegelberg, 1976; Oiler, 1982; Swanson, K . & Schonwald, 1988). ,

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. Mosher(1990)

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1. (1992). , 4, , 5- 16.
2. (1996). , 26(3), 668-677.
3. (1996). (), :
4. (1991). , 8, 149- 158.
5. (1996). - (), 77-83.
6. (1985). 가 (2).
7. (1994). 가 , 5(2).
8. (1992). 8 , 163- 191.
9. (1996). , 133- 191.
10. (1996). - , , 가 , 313-327.
11. (1993). , :
12. (1996). 가 , 26(2), 497- 506.
13. (1994) , :
14. (1983). : . 가 , :
15. (1996). , 137- 145.
16. (1995). , 24(2).
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- Abstract -

**Key word: Contraceptive experience, Prgnancy anxiety,
Married sexual activity, Contraceptive responsibility**

Experience of the Married Women on Contraception

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Lee, Mi La:Professor, College of Nursing, Chungang University

The study is to reveal what the married women has experienced while they were on the contraception. Data were gathered for four mothers beginning on October, 1996. Interviewees were 22 women. Data were analyzed by Colaizz's phenomenological data analysis method.

Three basic structures of contraception experience were derived. Those are 'Conflict in choosing contraceptive methods', 'Dilemmar in sexual relationship', and 'Responsibility concerning contraception'.

Contraception was a major task of the married women, and they difficulties, because sexual relation was usually initiated by husband and contraception by husband was negatively perceived in Korea culture.

Conflict were caused by inavailability of information, side effects of contraceptive methods, and limitation of the contraceptive methods. Interviewees perceived that responsibility of

contraception was on them, but they expressed feeling of anger against they burden by contraception. Most interviewees took initiation of contraception to keep their body healthy. Some of the interviewees got husband's cooperation through negotiation and shared responsibility with husband.

Suggestions were as follows ;

(1) Sex education, especially on communication about sex, is necessary to the married women.

(2) Informations on contraception should be provided in the private environment.

(3) Studies on husband's contraception experience are required to promote husband's cooperation.