JOURNAL REVIEW

Relationship satisfaction and outcome in women who meet their partner while using oral contraception


Oral contraception (OC) – ‘the pill’ – has been available for over 60 years and continues to be a cause célèbre. This latest study addresses relationship satisfaction and outcomes while using OC and suggests that its use influences the type of partner a woman chooses. The research looked at 2519 parous women; 1514 using no form of hormonal contraception and 1005 women using the combined pill. Both groups were questioned about their sexual and general (non-sexual) relationship satisfaction with their first child’s biological father. Participants were recruited through personal contact, by advertisement on pregnancy and parenting websites and through social networking websites and involved women in the UK, USA and the Czech Republic. Participants were told that the study was about their experiences of pregnancy, children and their relationship satisfaction, but not the specific hypotheses under test. Survey responses and information were completed online. Measures addressed sexual satisfaction, general relationship satisfaction, sexual rejection and compliant sex, attractiveness of partner and views of sex with different partners. The results showed that a woman’s use of OC at the time she met her partner had consequences for partnership outcome and concludes that women who met their partner while using OC were more satisfied in the non-sexual aspects than sexual aspects of their relationship with their partner, stayed together longer and separated later in contrast to women not using OC. This work builds on laboratory studies, which suggest that women choose a different sexual partner at different times of their menstrual cycle – hormonal variation over the cycle alters a woman’s preference for phenotypic indicators of men’s genetic or parental quality. As use of OC suppresses hormonal variation this may induce different mate preferences compared to choice when not using OC. The authors provide tentative conclusions that such effects have implications for reproductive behaviour, family cohesion and quality of life. So what advice for women or clinicians? In the associated News Release (12 October 2011) published by the University of Stirling, the lead author Dr Roberts states: “Choosing a non-hormonal barrier method of contraception for a few months before getting married might be one way for a woman to check or reassure herself that she is still attracted to her partner”. One might question such advice as research suggests this could well lead to unplanned pregnancy, and with statistics suggesting 0.8% to 30% paternal discrepancy one may also have to ask “Who is the daddy?”. 

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REFERENCE