

Determinants of contraceptive method preferences and satisfaction among patients visiting to a post-partum center: A cross-sectional study



Latika¹, Himanshi Sidana², Pushpa Dahiya³

¹Associate Professor, ²Senior Resident, ³Senior Professor and Head, Department of Obstetrics and Gynecology, Pt. B.D.S. PGIMS, Rohtak, Haryana, India

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ABSTRACT

Background: Women's health and well-being are intricately linked to family planning services, yet obstacles remain in the effective use of contraceptives despite widespread awareness. **Aims and Objectives:** The primary goals are to evaluate the knowledge, attitudes, and practices regarding contraceptive methods, identify factors influencing both preferences and non-use, and assess user satisfaction with these methods. **Materials and Methods:** A cross-sectional study was carried out from 2018 to 2019 at the Post-partum Center of a tertiary care institute, involving 238 literate women aged 18–45 years. Data were gathered through a pre-tested questionnaire that focused on sociodemographic characteristics, contraceptive knowledge, attitudes, preferences, and satisfaction levels. Statistical analysis was performed using the Chi-square test. **Results:** Most participants (74%) were aged between 21 and 30, and 55% came from rural areas. Awareness of contraceptive methods was high (92%), with condoms, pills, and intrauterine contraceptive devices being the most commonly known and used methods. Television (21.8%) and healthcare professionals (20.2%) served as major sources of information. While 33% of participants reported high satisfaction with their contraceptive methods, dissatisfaction was common, particularly due to side effects, such as excessive bleeding (34%) and irregular menstruation (30%). Significant relationships were found between education, occupation, family size, and contraceptive knowledge and attitudes ($P < 0.05$). **Conclusion:** Although awareness of contraceptive methods is high, barriers to effective access and use remain. Enhancing education, accessibility, and counseling services is essential to improving contraceptive use and satisfaction among patients visiting post-partum centers.

Key words: Contraceptive methods; Family planning; Contraceptive satisfaction; Contraceptive preferences

INTRODUCTION

Women's health and well-being are of vital importance for any society's overall development.^{1,2} It is closely associated with the utilization of family planning services.³⁻⁵ Family planning is not just birth spacing, but in various studies, it has been found that it is an important indicator of women's autonomy, liberation, and well-being.⁵⁻⁸ Lots of studies by

various authors have proved that there is a great unmet need for contraception usage.⁹ A study done by Igwegbe et al., found a notable correlation between parity and unmet contraceptive needs, differing from factors such as age, education level, religion, and husband's occupation.¹⁰ India introduced the National Programme for Family Planning in 1952, first worldwide. In 2017, the Department of Health and Family Welfare launched "Mission PariwarVikas"

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Address for Correspondence:

Dr. Pushpa Dahiya, Senior Professor and Head, Department of Obstetrics and Gynecology, Pt. B.D.S. PGIMS, Rohtak, Haryana, India.

Mobile: 9416291029, **E-mail:** pushpadahiya@yahoo.com

with the main goal of limiting India's total fertility rate to 2.1 by 2025. In this program, injection Depot Medroxyprogesterone Acetate with the name of "Antara" and Tablet Centchroman with the name of "Chhaya" were made available free of cost in all government hospitals to ensure the availability of high-quality family planning services to people.⁷ Projected estimates indicate that India's population could reach 1.53 billion by 2050, potentially resulting in a population explosion that could deplete already limited natural resources.

Thus, it is imperative to enhance awareness about contraception and promote its use. In light of this, we conducted a study with patients at the post-partum center of a tertiary care hospital to evaluate their knowledge, attitudes, and practices (KAP) regarding contraceptive methods, to identify factors influencing the preference and non-use of different contraceptive methods, along with their satisfaction levels with different contraceptives.

Aims and objectives

1. To evaluate the knowledge, attitudes, and practices related to contraceptive methods.
2. To identify factors influencing the preference and non-use of different contraceptive methods.
3. To assess user satisfaction with current contraceptive methods.

MATERIALS AND METHODS

This cross-sectional research was carried out at the Post-partum Center of a tertiary care institution over a 1-year duration, from 2018 to 2019. The center primarily serves post-partum patients who seek follow-up treatment and contraceptive counseling. The study included 238 literate women between the ages of 18 and 45. Participants were patients visiting the Post-partum Outpatient Department for contraceptive advice, post-partum follow-up, medical termination of pregnancy, and those who were already using contraceptives and returned for follow-up consultations. Informed consent was obtained from all individuals before their inclusion in the research.

A pre-tested questionnaire served as the main instrument for data collection, designed to collect detailed information across various important areas. These areas encompassed the participants' sociodemographic characteristics, their understanding of contraceptive methods, attitudes toward contraception, factors that influence their choice of specific contraceptives, and their levels of satisfaction with the methods utilized. Satisfaction was evaluated using a Likert scale, which provided quantitative insights into their

satisfaction levels. The collected data were compiled, and the Chi-square test was utilized to determine significant associations among the study variables. Furthermore, multiple response analysis was conducted to analyze questions that allowed for multiple answers. All statistical evaluations were conducted with a significance level set at 5%.

RESULTS

The study included a total of 238 participants. The majority of participants (74%) were in the age group of 21–30 years, followed by 21% who were aged 31–40 years. 55% of the study population came from rural areas, indicating a substantial representation from rural backgrounds. Comparing the educational status of the participants revealed that a significant portion had completed higher secondary school, 23% had completed high school, 22% had completed middle school, and 20% had only completed primary school. Only 15% of participants were graduates, and 13% had attained post-graduate education. This distribution underscores that the center primarily caters to a population that is predominantly rural and modestly educated. In terms of employment status, a majority of the participants (59%) were unemployed and housewives. The remaining participants included professionals (11.3%), clerks/shopkeepers (9%), and individuals in other occupations. The demographic profile reveals that a substantial proportion of the study population is either involved in household activities or unemployed. Income analysis revealed that 35% of participants had a monthly family income ranging from Rs. 5001 to 10,000, while another significant group (29%) reported a monthly family income of Rs. 1001–5000. This distribution reflects that the majority of participants belonged to lower socioeconomic statuses with limited financial resources. Marriage age analysis showed that more than half of the participants (60%) got married before the age of 20, while the remaining 40% got married between the ages of 21 and 30 years. This finding depicts an unmet need for contraceptive and family planning services in the study population, as early marriages often lead to early and closely spaced pregnancies. Regarding the number of living children, 48% of participants had two children, followed by 22%, who had only one child, and 14%, who had three children. This distribution demonstrates the diversity in family size preferences among the study participants (Table 1).

When analyzing awareness about contraception, a majority of participants (92%) reported that they were aware of contraceptive methods. Specifically, 17% had knowledge about contraceptive pills, 16% were aware of condoms, and 15% knew about intrauterine contraceptive devices

Table 1: Distribution of participants based on their socio-demographic profile

Parameter	n	%
Age (in years)		
<21	6	2.5
21–30	178	74.8
31–40	49	20.6
>40	5	2.1
Residence		
Urban	107	45.0
rural	131	55.0
Education		
Till primary level	48	20.2
Till mid school	53	22.3
Till high school	54	22.7
Till senior secondary	17	7.1
Graduate	35	14.7
Post-graduate	31	13.0
Profession		
Professional	27	11.3
Semi-professional	4	1.7
Clerk, farmer, shopkeeper	23	9.7
Skilled laborer	17	7.1
Semi-skilled laborer	17	7.1
Unskilled laborer	10	4.2
Unemployed	140	58.8
Family income/month (Rs)		
1000–5000	71	29.8
5001–10,000	83	34.9
10,001–15,000	39	16.4
15,001–20,000	11	4.6
>20,000	34	14.3
Age at marriage Z		
<20	142	59.7
20–30	96	40.3
Total alive children		
1	52	21.8
2	114	47.9
3	34	14.3
>3	9	3.8
None	29	12.2

(IUCDs). This high level of awareness indicates that most participants had some level of knowledge about different contraceptive options. In response to the question about where they could procure contraceptives, the majority (37%) indicated that hospitals were their primary source, followed by 33% who mentioned health centers. This finding highlights the importance of healthcare facilities in providing access to contraceptive services. Participants were also asked about their sources of information regarding various contraceptives. The most common sources included television (21.8%), health professionals (20.2%), friends (12.8%), and family members (11.5%). This diverse range of information sources indicates that participants received contraceptive information from both formal and informal channels. When questioned about the contraceptive methods used during lactation, 25% of participants preferred IUCDs, 21.2% opted for condoms, 19.3% chose sterilization procedures, and 12.7% used combined oral contraceptives. This variety of

preferences highlights the different contraceptive needs and choices among lactating women. A significant majority of participants (79%) agreed that delaying pregnancy using various contraceptive methods is important for regaining iron stores and ensuring better health for their children. This positive attitude toward spacing pregnancies underscores the perceived health benefits of contraceptive use. When asked if they found it difficult to obtain information about various contraceptive methods from health professionals, more than half (59%) were unsure, and only 23% agreed that it was difficult. Similarly, 58% were unsure if procuring contraceptives was a challenging task, while 25% agreed that it was difficult. These findings suggest that there may be barriers to accessing contraceptive information and services. Regarding the importance of using contraception immediately after childbirth, a majority of participants (78%) agreed with this statement. This finding indicates a strong positive attitude toward post-partum contraception among the study population. When asked who they would discuss their choice of contraceptive methods with, the majority (48%) said they would discuss it with their husbands. This highlights the role of spousal communication in contraceptive decision-making. A large majority of participants (81%) believed that using contraception is beneficial, and 82% expressed willingness to support their family and friends regarding contraceptive use. These findings indicate a positive attitude toward contraception and a willingness to promote its use within their social networks. In terms of contraceptive use, 70% of participants reported having used one or more contraceptive methods. Among those who had used contraception, 38% preferred condoms, while 27% each opted for pills and IUCDs. This distribution demonstrates the varying preferences for contraceptive methods among the participants. When asked about the duration of contraceptive use, 38% of participants reported having used contraception for at least 2–5 years, and an equal number had used it for more than 5 years. This indicates that a significant portion of the study population had long-term experience with contraceptive use. Regarding satisfaction levels with the contraceptive methods used, 33% of respondents strongly agreed that they were satisfied, 23% were unsure, and 23% were not satisfied. The main reasons for dissatisfaction included excessive bleeding (34%), and irregular bleeding (30%). These side effects significantly contributed to the discontinuation of contraceptive use. Among those not using contraception, 78% expressed a desire to use contraceptive methods in the future. The primary reasons for using contraception included spacing pregnancies (30%), avoiding unwanted pregnancies (25%), and improving self-health and their children's health (25%). When participants were asked about their reasons for choosing specific contraceptives,

37% cited minimal side effects as the primary factor, followed by 27% who preferred contraceptives that were easily and freely available. These considerations indicate that both efficacy and accessibility are important factors in contraceptive choice. Regarding the choice of contraceptive post-childbirth, the majority of participants (27%) preferred to use condoms. Among those unwilling to use contraception, 21% cited the desire to plan further pregnancies, 21% were fearful of side effects, and 15% acknowledged a lack of adequate information about available contraceptive choices.

The Chi-square test revealed significant associations between educational level and knowledge about contraception (P=0.021), attitude toward the need to delay successive pregnancies (P=0.004), and obtaining information about various contraceptive choices (P=0.006). In addition, there were significant associations between participants' attitudes toward obtaining contraceptive information and their profession, age at marriage, and the number of living children (P=0.029, 0.026, 0.031, respectively). The study also found a significant association between the number of living children and the perceived need for contraception after childbirth (P=0.038). Moreover, there was a significant association between contraceptive use and the number of living children (P=0.001) (Table 2).

These findings highlight the impact of educational level, professional status, and family size on contraceptive KAP among the study population.

DISCUSSION

The findings of this study provide significant insights into the KAP regarding contraceptive methods among women visiting the post-partum center of a tertiary care institute.

The results highlight various socio-demographic factors influencing contraceptive use and the level of satisfaction among users. A majority (92.43%) of the participants in this study were aware of contraceptive methods, indicating a high level of awareness. This is consistent with previous studies, such as those conducted by Aggarwal et al., in Delhi¹¹ and Benjamin et al., in Ludhiana,¹² which reported awareness levels of 83.5% and 87%, respectively, among students. The primary sources of information about contraception were media (TV, radio), health professionals, and social circles. This finding aligns with Ghike et al.,¹³ who found media to be a significant source of information for 70% of participants, although Pegu et al.,¹⁴ noted health workers as the primary source for 58.6% of their study population. A significant portion of the study population (79.41%) believed it was important to delay pregnancy after childbirth for better health outcomes. This positive attitude toward contraception is crucial for promoting family planning and reducing the total fertility rate. The favorable attitude toward contraception in this study aligns with findings from a KAP study conducted in Tezu village, Manipur,¹⁵ where 60% of subjects had a favorable attitude toward contraceptives. The high usage of condoms is consistent with other studies that emphasize their convenience and accessibility. The duration of contraceptive use varied, with many participants using methods for at least 2–5 years, demonstrating a long-term commitment to family planning. The satisfaction level with contraceptive methods was moderate, with 33.19% of respondents expressing strong satisfaction, while 23% were not satisfied. The main reasons for dissatisfaction included excessive bleeding and irregular menstruation, highlighting the need for better counseling on potential side effects and management strategies. Significant associations were found between educational level and knowledge of contraception (P=0.021), attitude toward pregnancy spacing (P=0.004), and obtaining information

Table 2: Association of socio-demographic variables with contraceptive knowledge, attitudes, and practices (Chi-square test results)

Variable	Age (P-value)	Residence (P-value)	Education (P-value)	Profession (P-value)	Family income (P-value)	Age at Marriage (P-value)	No. of living children (P-value)
Awareness of contraceptive methods	0.442	0.290	0.021	0.835	0.596	0.529	0.553
Belief in delaying pregnancy for health	0.957	0.071	0.004	0.640	0.433	0.149	0.168
Difficulty in accessing information	0.648	0.978	0.006	0.029	0.062	0.026	0.031
Difficulty in obtaining contraceptives	0.214	0.695	0.180	0.186	0.156	0.472	0.368
Importance of post-partum contraceptive use	0.771	0.323	0.067	0.397	0.397	0.504	0.038
Perceived benefits of contraceptive use	0.704	0.780	0.094	0.387	0.180	0.856	0.865
Discussion with family/friends	0.576	0.789	0.062	0.437	0.109	0.203	0.941
Contraceptive use history	0.353	0.947	0.345	0.173	0.418	0.058	0.001
Duration of contraceptive use	0.053	0.120	0.377	0.559	0.772	0.872	0.483

The bold value indicate the statistically significant association.

about contraceptive choices ($P=0.006$). This underscores the importance of education in enhancing contraceptive use and informed decision-making. Similarly, variables such as profession, age of marriage, and the number of living children also significantly influenced attitudes toward contraception and information procurement. The study also identified reasons for non-use of contraception, such as planning further pregnancies, fear of side effects, and lack of adequate information. Targeted interventions are necessary to address these barriers and enhance the uptake of contraceptives. The study's findings have significant implications for public health strategies and policies. The high level of awareness but moderate satisfaction indicates a need for comprehensive education and counseling services. Health professionals should provide accurate information about different contraceptive methods, their benefits, and potential side effects to ensure informed choices. In addition, addressing misconceptions and fears associated with contraception can help overcome barriers to its use. The significant association between education and contraceptive knowledge and attitudes highlights the need to integrate family planning education into broader educational curricula and community programs. Ensuring easy access to a variety of contraceptive methods and strengthening the role of health professionals in family planning counseling can further enhance the effectiveness of family planning programs.

Limitations of the study

This study was carried out at a single post-partum center, which may restrict the applicability of the findings to other areas or settings. Relying on self-reported data can introduce biases, such as recall bias, potentially affecting the reliability of the participants' answers. Furthermore, excluding illiterate women may overlook essential perspectives from a vulnerable group that typically faces a greater unmet need for family planning.

CONCLUSION

This study offers an in-depth examination of the factors that impact the preference and satisfaction levels regarding various contraceptive methods among post-partum women. It demonstrates a high level of awareness about contraceptive options; however, a significant segment of the population still encounters difficulties in obtaining information and effectively utilizing these contraceptives. The most commonly favored methods were condoms, pills, and IUCDs, suggesting that ease of use and accessibility significantly influence decision-making. Satisfaction levels were found to be moderate, with many participants reporting dissatisfaction due to side effects such as excessive bleeding and irregular menstruation. In addition, the research

identified that educational background, professional status, age at marriage, and the number of children significantly influence attitudes and choices concerning contraceptive use. These insights highlight the necessity for focused interventions aimed at enhancing contraceptive use and satisfaction through improved education, better accessibility, and more effective counseling services.

RECOMMENDATIONS

1. Enhance educational programs and counseling services to bolster family planning knowledge and alleviate concerns regarding contraceptive side effects
2. Future studies should emphasize longitudinal research to evaluate the long-term effectiveness of family planning initiatives and develop strategies to improve contraceptive usage and satisfaction
3. Promote post-partum contraception to ensure healthier spacing between pregnancies and address barriers such as fear of side effects via public health initiatives and training.

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Authors' Contribution:

L- Concept, design, literature search, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing, manuscript review, guarantor; **PD-** Concept, design, data analysis, manuscript editing, manuscript review, guarantor; **HS-** Literature search, data acquisition, statistical analysis, manuscript editing, guarantor.

Work attributed to:

Department of Obstetrics and Gynecology, Pt. B.D.S. PGIMS, Rohtak, Haryana, India.

Orcid ID:

Latika - <https://orcid.org/0009-0008-5348-7584>

Pushpa Dahiya - <https://orcid.org/0009-0004-0099-2203>

Himanshi Sidana - <https://orcid.org/0000-0003-4357-0962>

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