

# ROLE OF HEALTH CARE PROVIDERS AND MOTHER-IN-LAW IN CHOOSING FAMILY PLANNING METHODS AMONG MARRIED WOMEN

Jhunu Sarkar<sup>1\*</sup>, Gaurav Tyagi<sup>2</sup>

<sup>1\*</sup>PhD Scholar, Department of Nursing, Desh Bhagat University, Mandi Gobindgarh, Punjab

<sup>2</sup>Professor, Faculty of Nursing, Desh Bhagat University, Mandi Gobindgarh, Punjab

\*Corresponding Author: Ms. Jhunu Sarkar (Email: [jhunusarkar71@gmail.com](mailto:jhunusarkar71@gmail.com))

## ABSTRACT

Family planning is a vital component of reproductive health that contributes to the reduction of maternal and infant mortality and promotes the well-being of families and communities. The choice and utilization of contraceptive methods among married women are influenced by various social, cultural, and institutional factors. Among these determinants, health care providers and mothers-in-law play an important role in shaping reproductive decisions in many developing countries. Health care providers act as counsellors, educators, and motivators who provide information regarding contraceptive methods and reproductive health services. Mothers-in-law influence family planning decisions through family authority, cultural expectations, and fertility preferences. This review article examines the role of health care providers and mothers-in-law in choosing family planning methods among married women. The article discusses sociocultural determinants, barriers to contraceptive utilization, women's autonomy, counseling practices, and family-centered reproductive interventions. Recent evidence indicates that supportive counseling and positive family involvement improve contraceptive acceptance and continuation among married women. Conversely, inadequate counseling, myths related to contraception, and pressure from family elders negatively affect family planning utilization. The review emphasizes the importance of involving influential family members in reproductive health education and strengthening community-based counseling services to improve reproductive health outcomes.

**Keywords:** Health care providers, Family Planning, Married women, Contraceptive Methods, Women Empowerment.

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## Introduction

Family planning is a fundamental component of reproductive health services that enables couples to determine the timing and spacing of pregnancies while improving maternal and child health outcomes (Ahmed et al., 2021). Access to contraception supports informed reproductive choices, reduces unintended pregnancies, and lowers maternal and infant mortality rates (World Health Organization, 2025). Modern contraceptive methods contribute significantly to preventing unsafe abortions, reducing pregnancy-related complications, and promoting healthy birth spacing, which improves neonatal survival and maternal recovery (Yadav et al., 2021). Figure 1 illustrates the role of family planning in promoting reproductive health and healthy family practices among married women. In developing countries, family planning programs integrated into primary health care systems enhance reproductive well-being and contribute to socioeconomic development among families (World Health Organization, 2023). Government-supported services provide contraceptive counseling, education, and maternal health support, particularly through community health workers such as ASHAs and ANMs (Rao et al., 2022). Family planning also empowers women by improving educational and

employment opportunities and promoting gender equality through active participation in household decision-making (Banerjee et al., 2020). Counseling by health care providers helps reduce myths and misconceptions regarding contraception and encourages informed contraceptive use (Mehta et al., 2020). Despite progress, barriers such as social stigma, fear of side effects, and restricted reproductive autonomy continue to affect utilization (Khan et al., 2021). Strengthening community-based interventions and integrating family-centered counseling can significantly improve contraceptive acceptance and reproductive health outcomes (Anukriti et al., 2022).



**Figure 1: Importance of Family Planning in Reproductive Health**

Family planning decisions among married women are influenced by social, cultural, economic, educational, and familial factors that shape contraceptive utilization and reproductive behavior across communities (Bhandari et al., 2020). In many patriarchal societies, women often have limited autonomy because reproductive decisions are influenced by family elders, cultural expectations, and traditional beliefs regarding fertility and ideal family size (Singh et al., 2019). Mothers-in-law frequently play a dominant role in influencing childbirth timing and contraceptive use, often encouraging early pregnancy and discouraging spacing methods until family expectations are fulfilled (Mondal & Pradhan, 2023). Educational status and economic independence significantly improve women's participation in reproductive decisions and increase awareness regarding contraceptive methods (Roy et al., 2018). Health care providers such as nurses, physicians, ASHAs, and ANMs play an essential role by providing counseling, reproductive education, and awareness regarding modern family planning options (Kaur et al., 2022). Counseling delivered through home visits and outreach activities improves contraceptive acceptance and reduces misconceptions regarding side effects (Rao et al., 2022). Family-centered counseling involving husbands and mothers-in-law enhances support for reproductive choices and improves contraceptive continuation rates (Anukriti et al., 2022). These findings highlight the need for culturally sensitive interventions and strengthened reproductive health services to improve family planning acceptance among married women.

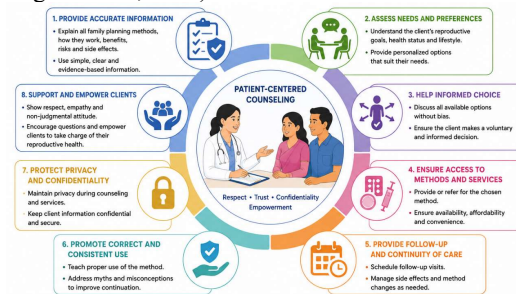
**Methodology**

The present review article was developed using literature published between 2016 and 2026 related to family planning, women empowerment, reproductive health counseling, and sociocultural determinants affecting contraceptive use among married women (Kumar et al., 2020). A narrative review approach was adopted to examine evidence regarding the influence of health care providers and mothers-in-law on family planning decisions across different sociocultural settings (Mondal & Pradhan, 2023). Relevant literature was identified through systematic searches of peer-reviewed journals, nursing research articles, public health reports, and international reproductive health databases including PubMed, Scopus, Google Scholar, CINAHL, and ScienceDirect (Patel et al., 2023). Research focusing on sociocultural determinants, contraceptive barriers, women's autonomy, and family-centered reproductive interventions was included (Singh et al., 2019). Special emphasis was placed on studies conducted in developing countries, particularly South Asia, where family systems strongly influence reproductive decisions (Dixit et

al., 2022). The selected literature was critically analyzed and categorized into themes including health care provider roles, mothers-in-law influence, counseling practices, and women empowerment (Roy et al., 2024). This structured methodology provided an evidence-based framework for understanding family planning decision-making among married women across diverse sociocultural contexts.

**Role of Health Care Providers in Family Planning**

Health care providers are essential contributors to reproductive health services and family planning programs because they improve contraceptive awareness, reproductive counseling, and maternal health outcomes among married women (Kaur et al., 2022). Nurses, physicians, midwives, ASHAs, and ANMs educate women regarding available contraceptive methods and support informed reproductive decision-making based on individual health needs and fertility preferences (Kumar et al., 2020). Counseling includes information about contraceptive effectiveness, benefits of birth spacing, prevention of unintended pregnancies, and reduction of maternal and infant mortality (World Health Organization, 2025). Figure 2 demonstrates the major functions of health care providers in reproductive counseling and family planning services among married women. Effective counseling reduces myths and misconceptions related to infertility, side effects, and contraceptive use, thereby increasing women's confidence in modern family planning methods (Mehta et al., 2020). Community health workers play a vital role in rural settings through home visits, awareness campaigns, and counseling sessions that improve access to reproductive health information (Rao et al., 2022). Health care providers also encourage male involvement and family participation in reproductive decision-making, promoting shared responsibility for contraception (Anukriti et al., 2022). However, challenges such as inadequate provider training and limited accessibility affect service quality (Tripathi et al., 2018). Strengthening evidence-based counseling and integrating reproductive health services into primary care significantly improve contraceptive utilization and maternal health outcomes (World Health Organization, 2023).



**Figure 2: Role of Health Care Providers in Family Planning Counseling**

Community health workers such as Accredited Social Health Activists (ASHAs) and Auxiliary Nurse Midwives (ANMs) play a crucial role in rural settings where women often have limited access to reproductive health information and family planning services (Rao et al., 2022). They act as a bridge between rural communities and the health care system by providing contraceptive counseling, reproductive education, and awareness regarding healthy birth spacing through regular home visits and community outreach programs (Sharma et al., 2023). Their counseling helps reduce myths and misconceptions related to contraceptive side effects and infertility, increasing women's confidence in modern family planning methods (Joshi et al., 2022). Table 1 presents factors influencing family planning method selection, including education, family support, and provider counseling. Community-based interventions by ASHAs and ANMs improve contraceptive acceptance, reproductive autonomy, and maternal health outcomes, particularly among women in underserved rural populations (World Health Organization, 2025).

**Table 1: Factors Influencing Family Planning Method Selection Among Married Women**

Factors	Influence on Family Planning
Educational status	Improves awareness and autonomy
Provider counseling	Encourages contraceptive use
Family pressure	Influences reproductive decisions
Cultural beliefs	Affects acceptance of contraception
Economic condition	Determines accessibility of services
Women autonomy	Improves informed decision-making

**Influence of Mothers-in-Law on Family Planning Decisions**

Mothers-in-law play an influential role in shaping reproductive decisions and family planning practices among married women, particularly in patriarchal and traditional societies. Cultural norms, household hierarchy, and fertility expectations often position older women as key decision-makers regarding childbirth and contraceptive use. Newly married women are frequently expected to conceive early to demonstrate fertility and continue the family lineage, which discourages contraceptive use and limits birth spacing practices. Preference for male children further contributes to repeated pregnancies and delayed adoption of family planning methods. Women living in joint family systems often

experience reduced reproductive autonomy because family elders strongly influence decisions related to childbirth and contraception. Fear of criticism, social pressure, and misconceptions regarding infertility associated with contraceptive use also discourage women from openly discussing family planning options. Closely spaced pregnancies increase risks such as maternal anemia, preterm birth, and low birth weight, negatively affecting maternal and child health outcomes. Table 2 presents the positive and negative influence of mothers-in-law on family planning practices and highlights their role in shaping women's reproductive decisions. However, supportive mothers-in-law can positively influence maternal health by encouraging antenatal care, healthy birth spacing, and reproductive counseling. Family-centered educational interventions involving mothers-in-law improve contraceptive awareness and reduce misconceptions, thereby promoting informed reproductive decision-making and improved maternal health outcomes.

**Table 2: Positive and Negative Influence of Mothers-in-Law on Family Planning**

Positive Influence	Negative Influence
Encouragement of maternal care	Pressure for early childbirth
Support for birth spacing	Opposition to contraception
Assistance in accessing services	Preference for male child
Participation in counseling	Restriction of women autonomy

**Sociocultural Determinants of Family Planning**

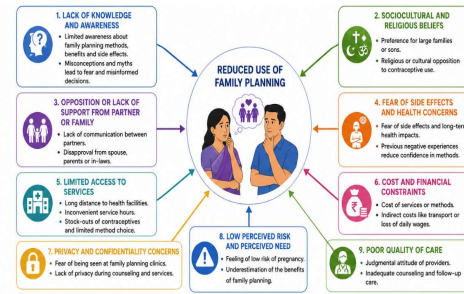
Sociocultural factors significantly influence family planning practices among married women because reproductive decisions are shaped by cultural beliefs, family expectations, and gender norms within communities (Bhandari et al., 2020). In many patriarchal societies, women have limited autonomy regarding contraceptive choices, as decisions are often influenced by husbands, mothers-in-law, and family elders (Singh et al., 2019). Son preference, ideal family size, and pressure for early childbirth frequently delay contraceptive adoption and reduce women's reproductive freedom (Gupta et al., 2021). Religious beliefs and misconceptions regarding infertility and contraceptive side effects further discourage family planning acceptance (Khan et al., 2021). Educational status plays a major role, as educated women are more likely to access reproductive health services and participate actively in contraceptive decision-making (Ahmed et al., 2021). Economic independence also strengthens women's ability to negotiate reproductive choices within households (Banerjee et al., 2020). Community attitudes, media exposure, and

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awareness campaigns positively influence family planning acceptance by reducing myths and promoting reproductive rights (Roy et al., 2024). Health care providers contribute by offering culturally sensitive counseling and involving family members in reproductive education (Kumar et al., 2020). These findings highlight the need for women empowerment, education, and community-based interventions to improve contraceptive utilization and reproductive health outcomes among married women (World Health Organization, 2025).

### Barriers to Family Planning Utilization

Although awareness regarding family planning has improved in recent years, several barriers continue to affect contraceptive utilization among married women across developing communities (Sengupta et al., 2022). Fear of side effects such as infertility, excessive bleeding, and weakness remains a major reason for nonuse or discontinuation of contraceptive methods (Thomas et al., 2020). Figure 3 illustrates the common barriers affecting family planning utilization among married women. Misconceptions regarding infertility and social stigma often discourage women from adopting modern contraceptive methods, especially in rural areas where access to accurate reproductive health information is limited (Joshi et al., 2022). Religious beliefs and cultural expectations related to early childbirth and son preference further influence resistance toward family planning acceptance (Khan et al., 2021). Opposition from husbands and mothers-in-law significantly restricts women's reproductive autonomy and limits their ability to make independent contraceptive choices (Anukriti et al., 2022). Limited accessibility of reproductive health services, transportation difficulties, shortage of trained health workers, and poor-quality counseling also contribute to unmet contraceptive needs (Tripathi et al., 2018). Inadequate counseling may increase fear and reduce confidence in contraceptive methods (Mehta et al., 2020). Economic dependency and low educational status further restrict access to reproductive health services (Banerjee et al., 2020). These findings highlight the need for culturally sensitive counseling, improved health infrastructure, and family-centered educational interventions to strengthen contraceptive acceptance and improve maternal health outcomes (World Health Organization, 2025).



**Figure 3: Common Barriers Affecting Family Planning Utilization**

### Women's Autonomy and Reproductive Rights

Women's autonomy is an essential component of reproductive health because it enables women to make informed decisions regarding fertility choices and contraceptive use (Jain et al., 2017). Reproductive rights include the freedom to decide the number and spacing of children without coercion or family pressure (World Health Organization, 2025). In many patriarchal societies, traditional gender norms, family hierarchy, and pressure from husbands or mothers-in-law often restrict women's ability to make independent reproductive decisions (Singh et al., 2019). Such limitations reduce contraceptive utilization and increase the risk of unintended pregnancies and maternal complications (Thomas et al., 2020). Education is one of the most effective strategies for improving women's reproductive autonomy, as educated women are more likely to seek reproductive health services and actively participate in family planning decisions (Roy et al., 2018). Economic independence further strengthens women's decision-making power and access to contraceptive services (Banerjee et al., 2020). Family-centered counseling involving husbands and mothers-in-law improves support for reproductive choices and promotes shared decision-making (Anukriti et al., 2022). Health care providers also play a vital role by offering respectful and culturally sensitive counseling (Patel et al., 2023). Strengthening women's autonomy through education, employment, and supportive family involvement significantly improves contraceptive utilization and maternal health outcomes (World Health Organization, 2025).

### Strategies for Improving Family Planning Acceptance

Improving family planning acceptance requires collaborative efforts involving health care providers, communities, policymakers, and family members to address barriers affecting contraceptive utilization among married women (Das et al., 2024). Family planning programs are most effective when reproductive health services are integrated with culturally sensitive educational interventions and community participation strategies (World Health Organization, 2025). Community awareness programs conducted through village meetings,

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health camps, and media campaigns help reduce myths and misconceptions regarding contraceptive methods while improving knowledge of healthy birth spacing (Rao et al., 2022). Training health care providers in culturally sensitive counseling practices enhances the quality of reproductive health services and builds trust between women and health professionals (Kaur et al., 2022). Respectful counseling, privacy, and non-judgmental communication encourage informed contraceptive decision-making (Patel et al., 2023). Involving husbands and mothers-in-law in counseling sessions promotes family support and shared reproductive decision-making within households (Anukriti et al., 2022). Educational interventions targeting influential family members are particularly effective in reducing opposition to contraception (Dixit et al., 2022). Strengthening rural health infrastructure, ensuring contraceptive availability, and empowering women through education and economic independence further improve contraceptive utilization (Banerjee et al., 2020). These integrated approaches create supportive reproductive health environments and significantly improve maternal and child health outcomes across communities (World Health Organization, 2025).

### **Discussion**

The present review demonstrates that family planning decisions among married women are influenced by the interaction of health systems, cultural norms, social expectations, and family structures that shape reproductive behavior and contraceptive utilization (Sengupta et al., 2022). Health care providers positively influence contraceptive awareness through counseling, education, and outreach activities that improve women's understanding of reproductive health and informed decision-making (Kumar et al., 2020). Nurses, physicians, ASHAs, and ANMs play a critical role in promoting contraceptive awareness and reducing misconceptions related to infertility and side effects (Kaur et al., 2022). Mothers-in-law also significantly influence reproductive decisions due to their authority within traditional family systems (Mondal & Pradhan, 2023). While some discourage contraceptive use because of expectations regarding early childbirth and male child preference, supportive mothers-in-law can encourage healthy birth spacing and maternal health service utilization (Anukriti et al., 2022). Supportive family environments and quality counseling services significantly improve contraceptive acceptance among married women (Ahmed et al., 2021). Family-centered reproductive counseling involving husbands and mothers-in-law strengthens shared decision-making and reduces resistance to family planning methods (Khan et al., 2021). Women empowerment through education, employment opportunities, and reproductive rights awareness further enhances autonomy in contraceptive choices

(Mishra et al., 2019). These findings highlight that culturally sensitive, family-centered, and health system-based interventions are essential for strengthening reproductive autonomy and improving maternal and child health outcomes (World Health Organization, 2025).

### **Nursing Implications**

#### **Nursing Education**

Nursing curricula should include comprehensive reproductive health counseling and communication skills related to family planning services to prepare nurses for effective client-centered care (Kaur et al., 2022). Training should emphasize contraceptive education, culturally sensitive counseling, informed consent, and strategies for addressing myths and misconceptions regarding family planning (Mehta et al., 2020). Practical exposure through simulations and community-based learning can enhance nurses' ability to counsel women and families confidently (Thomas et al., 2020). Developing strong interpersonal communication skills enables nurses to support reproductive decision-making, maintain confidentiality, and promote women's autonomy (World Health Organization, 2023). Integrating these competencies into nursing education strengthens reproductive health services and improves maternal outcomes.

#### **Nursing Practice**

Nurses should provide evidence-based counseling to ensure women and couples receive accurate information regarding contraceptive methods, birth spacing, and reproductive health options (Kumar et al., 2020). Counseling should address misconceptions, explain benefits and side effects clearly, and support informed decision-making based on individual needs (Patel et al., 2023). Nurses should also encourage family participation in reproductive health education when appropriate, particularly involving husbands and mothers-in-law to promote shared understanding and support (Anukriti et al., 2022). Family-centered counseling strengthens communication within households, reduces resistance to contraception, and improves acceptance of family planning services, ultimately contributing to better maternal and child health outcomes (World Health Organization, 2025).

#### **Nursing Administration**

Health administrators should improve accessibility of family planning services by strengthening reproductive health infrastructure, expanding outreach programs, and ensuring availability of contraceptive supplies in both urban and rural settings (World Health Organization, 2023). They should prioritize equitable access to counseling and family planning services for underserved populations through community-based interventions and mobile health initiatives (Rao et al., 2022). Adequate provider training is essential to equip nurses, midwives, and health workers with evidence-based knowledge, counseling skills, and

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culturally sensitive communication practices (Kaur et al., 2022). Continuous professional development programs enhance service quality, improve client satisfaction, and support effective reproductive health counseling for better maternal and family health outcomes.

### **Nursing Research**

Further studies should evaluate the effectiveness of family-centered reproductive interventions and strategies specifically targeting mothers-in-law to better understand their influence on family planning decisions among married women (Anukriti et al., 2022). Research should examine how involving mothers-in-law in counseling sessions affects contraceptive acceptance, birth spacing practices, and women's reproductive autonomy across diverse cultural settings (Mondal & Pradhan, 2023). Longitudinal studies are needed to assess the sustainability of such interventions and their impact on maternal and child health outcomes (World Health Organization, 2025). Exploring culturally tailored educational approaches can provide valuable evidence for designing effective reproductive health programs that strengthen family support and informed decision-making.

### **Conclusion**

Family planning is an essential component of reproductive health and maternal well-being because it enables couples to make informed decisions regarding the timing and spacing of pregnancies, thereby improving maternal and child health outcomes (World Health Organization, 2025). Health care providers and mothers-in-law significantly influence the choice and utilization of contraceptive methods among married women, particularly in societies where family structures strongly shape reproductive decisions (Mondal & Pradhan, 2023). Health workers such as nurses, midwives, ASHAs, and ANMs contribute positively through education, counseling, and service delivery by improving awareness regarding modern contraceptive methods and addressing misconceptions related to family planning (Kaur et al., 2022). In contrast, mothers-in-law may either support or discourage contraceptive use depending on cultural beliefs, fertility expectations, and family preferences regarding childbirth and family size (Dixit et al., 2022). Supportive counseling, women empowerment, and active involvement of influential family members are important for improving reproductive autonomy and family planning acceptance among married women (Anukriti et al., 2022). Educational advancement and economic independence further strengthen women's ability to participate actively in reproductive decision-making (Banerjee et al., 2020). Strengthening community-based reproductive health interventions and culturally sensitive counseling approaches can reduce sociocultural barriers, improve contraceptive utilization, and contribute significantly to improved

maternal and child health outcomes across diverse communities (World Health Organization, 2023).

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