

# Population Suppression Strategy Through Balanced Family Planning Counseling on the Decision to Select Postpartum Family Planning

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**Abstract:** The Balanced Counseling Strategy for Family Planning (SKB-KB) significantly influences the decision to choose Postpartum Family Planning (KBPP). SKB-KB provides comprehensive information to couples about contraceptive methods after childbirth. This study aims to assess the impact of SKB-KB counseling on KBPP decisions in 2024 and its contribution to population reduction. A quasi-experimental method was used, with sample size determined by G-Power software, involving 71 respondents aged 38-39 weeks, divided across seven healthcare facilities. These include TPMB Alfiatun Jannah Asmin Jakarta, UPTD Sobang Public Health Center, Cipanas Inpatient Health Center, and others. The study employed a one-group pre-test and post-test design to measure the impact of counseling. Results show that SKB-KB counseling significantly affects the choice of postpartum contraception, indicating its potential in reducing population growth. The findings highlight that midwives can effectively educate family planning acceptors using balanced counseling strategies, helping them make informed contraceptive choices. This strategy is essential in contributing to population control efforts.

**Keywords:** Counseling; Family planning; Population

## Introduction

State The high population is a global problem that has received widespread attention from countries around the world, especially developing countries. The 2018 World Population Data Sheet data shows that Indonesia is ranked fourth in the world after China, India and the United States in terms of population, with an estimate of 265.2 million people (Obure et al., 2016; Sharkey et al., 2021). This raises a number of challenges that need to be addressed seriously (Obure et al., 2016). One of the impacts of a large population is increased pressure on natural resources and the environment. Rapid population growth can cause water scarcity, increasingly limited land, and increased energy use.

Apart from that, the high population can also worsen social and economic inequality. If there is no fair distribution of resources and opportunities, the gap between societal groups can widen (Sharkey et al., 2021). Within the framework of the Sustainable Development Goals (SDGs) in 2030, meeting the need for contraception is an important factor in achieving several targets set. Access to contraceptive information and services is a crucial step in reducing the rate of unwanted pregnancies (Duane et al., 2022; Vernon et al., 2023). By providing individuals with knowledge and options regarding available contraceptive methods, they can make better decisions in planning their family life (Duane et al., 2022).

### How to Cite:

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The Indonesian government continues to strive to increase the use of long-term contraception (MKJP) such as implants and IUDs through various programs and policies. The National Family Planning Movement, the National SDKI Strategy, subsidizing the costs of installing MKJP, training medical personnel, public education, and involving community leaders are some examples (Gardner et al., 2023; Rice et al., 2022). This effort has shown positive results with an increase in the prevalence of MKJP use. However, there are still several challenges such as lack of knowledge, concerns about side effects, costs, and uneven access to services. For this reason, the government needs to strengthen education, increase access to services, and overcome other obstacles to achieve the target of reducing maternal and infant mortality rates and improving the quality of family life (BKKBN, 2024).

The lack of interest of family planning acceptors in MKJP such as implants and IUDs is caused by several factors, such as minimal knowledge, concerns about side effects, expensive initial costs, complicated installation process, lack of husband's support, desire to get pregnant in the future, religious and cultural factors, as well as limited access to services (Cooper et al., 2014; Gelagay et al., 2023). Efforts to increase the use of MKJP need to be made with education that is easier to understand, training of medical personnel, expanding access to services, subsidizing costs, and involving community leaders (Lin et al., 2008; Lindley et al., 2021b). The Balanced Counseling Strategy (SKB) developed by the Ministry of Health and BKKBN since August 2016 is a counseling method that uses 4 tools, namely counseling diagrams, counseling cards, family planning matching diagrams and brochures for each contraceptive method (BKKBN, 2024). The definition of KBPP is family planning services provided to couples of childbearing age (PUS) after delivery for up to 42 days with the aim of spacing pregnancies or ending fertility. To be more effective and efficient and to avoid missed opportunities, KBPP is prioritized to be given directly after the mother gives birth or before the mother returns home from the health facility. In general, almost all contraceptive methods can be used as postpartum birth control methods (Bhardwaj et al., 2024; Salam et al., 2016).

One of the challenges that arises in the context of comprehensive KBPP services is the increasing number of "unmet needs" or needs that are not met in family planning. This situation reflects conditions where couples of childbearing ages want to plan their family, but experience obstacles in accessing appropriate information, services or contraceptive methods. To overcome this challenge, ongoing efforts are needed to increase the accessibility and availability of KBPP information and services (Lindley et al., 2021a).

**Balanced Counseling Strategy - Family Planning (SKB-KB)** has the advantage that providing counseling focuses on the client, is more interactive, the decision is really made by the client without being influenced by the counselor (Leocata et al., 2021; Tumlinson et al., 2022). In addition, with the help of the 4 tools used, it is visually more attractive and effective in helping clients increase their knowledge. SKB is able to increase the adoption of postpartum contraceptive use and improve the quality of care and client knowledge about certain methods if providers use work aids (Mbunge & Sibiya, 2024). Research conducted by Darmastuti et al. (2022) with the research title The Effect of Balanced Counseling Strategies on Increasing Knowledge and Attitudes about Family Planning in Pregnant Women showed that the results of the control group research showed an increase in knowledge value of 5.11 ( $p$ -value = 0.030) while in attitude score with an increase of 0.11 ( $p$ -value = 0.650). The effect of the intervention on knowledge and attitudes was obtained using the Mann-Whitney Test. The significance value of knowledge was  $p$  = 0.045, so there was a significant difference between counseling with SKB and the class method for pregnant women about family planning, so that providing counseling with the Balanced Counseling Strategy - Family Planning (SKB-KB) was more effective. Effectively improve attitudes and knowledge.

Based on research results, it is stated that the family planning counseling strategy (SKB-KB) can influence the implementation of family planning during postpartum and the implementation of postpartum family planning. Therefore, the title of the research is "The Influence of Counseling with a Balanced Counseling Strategy - Family Planning (SKB-KB) on the Decision to Selection of Postpartum Family Planning (KBPP) in 2024.

## Method

This research was conducted to determine the effect of tamarillo juice on hemoglobin (HB) levels. This research was conducted to determine the effect of counseling with a balanced counseling strategy-family planning (SKB-KB) on the decision to choose postnatal family planning (KBPP). The population is all respondents pregnant in the third trimester, gestational age 38-39 weeks. The sample size was determined using a software application G-Power Version 3.1.9.4 with t test (Difference from constant (one sample case) effect size is 0.3,  $\alpha$  err prob = 0.05, power (1- $\beta$  err prob) = 0.80 Estimated total sample to be recruited there were 71 respondents of 38-39 weeks' gestation who were divided into 7 practice areas, namely TPMB Alfiatun Jannah Asmin Jakarta totaling 5 respondents, UPTD Puskesmas Sobang totaling 15 people, Cipanas Inpatient Health Center totaling 15 people, TPMB Hotma Cikarang

totaling 5 people, Polyclinic Hospital Jakarta Port numbered 8 people, Jakarta Port Maternity Room numbered 8 people, Muncung Inpatient Health Center numbered 15 people. The independent variable was counseling with a balanced counseling strategy-family planning (SKB-KB). The dependent variable was the decision to choose postpartum family planning (KBPP). This research is research Quasy experiment with one group pre test - post test design type. Bivariate analysis uses the dependent t-test (paired sample t-test).

The implementation of the research was that the researcher assessed the beginning before the intervention was carried out, namely counseling with a balanced counseling strategy-family planning (SKB-KB) using a questionnaire regarding the decision to choose postpartum family planning (KBPP) for pregnant women in the third trimester of 38-39 weeks' gestation. Then the researchers carried out a counseling intervention with a balanced counseling strategy-family

planning (SKB-KB). After the intervention, the researchers re-assessed it by giving a questionnaire regarding the decision to choose postpartum family planning (KBPP) during the active phase of the first stage of labor. The decision categories for choosing postpartum family planning (KBPP) are fast decisions and slow decisions.

## Result and Discussion

### Result

Average Score of Decision on Selecting Postpartum Family Planning (KBPP) for Pregnant Women in Third Trimester Pregnancy Age 38-39 Weeks Before Intervention at TPMB Alfiatun Jannah Asmin Jakarta, Sobang Health Center, Cipanas Inpatient Health Center, TPMB Hotma Cikarang, Jakarta Harbor Hospital Polyclinic, Community Health Center Muncung Hospitalization in 2024.

**Table 1.** Postpartum Family Planning Selection Decisions

Postpartum Family Planning Selection Decision (KBPP)	N	Mean	Standard deviation	Min	Max
Before	71	42.68	9.096	30	60
After		49.15	9.733	30	70

Based on Table 1 above, it can be seen that the assessment of the decision to select postpartum family planning (KBPP) before providing a Balanced Counseling Strategy-Family Planning (SKB-KB) was obtained with an average value of 42.68, and a standard deviation of 9.096 with the assessment of the decision to select family planning postpartum, a minimum of 30 and a maximum of 60. Meanwhile, after providing a Balanced Counseling Strategy-Family Planning (SKB-KB), the average score was 49.01, and the standard

deviation was 9.733, with a postnatal family planning decision assessment of a minimum of 30 and a maximum of 70.

Comparison of Average Scores Before and After Intervention Decisions on Postpartum Family Planning Selection (KBPP) TPMB Alfiatun Jannah Asmin Jakarta, Sobang Health Center, Cipanas Inpatient Health Center, TPMB Hotma Cikarang, Jakarta Harbor Hospital Polyclinic, Muncung Inpatient Health Center in 2024.

**Table 2.** Postpartum Family Planning Selection Decision

Postpartum Family Planning Selection Decision (KBPP)	N	Mean	Difference
Before	71	42.68	
After		49.15	6.47

Based on Table 2 above, it can be seen that the assessment of the decision to choose postpartum family planning before and after shows a difference of 6.47. This means that there is a difference in decision making for selecting post-natal family planning (KBPP) where a good score for assessing the decision for selecting post-natal family planning is obtained after carrying out the Balanced Counseling Strategy-Family Planning (SKB-KB).

### Bivariate Analysis Results

Based on the Wilcoxon test, the majority of average scores from 71 respondents were positive, namely an

increase in the postnatal family planning decision (KBPP) score with an average of 20.00 and a sum of rank of 780.00, with the same assessment before and after as much as 32 people, which means that before and after the balanced counseling strategy - family planning (SKB-KB) was implemented, there was no change in the initial decision before the intervention. The research results are known as Asymp. Sig (2 - Talled) has a value of 0.000 because  $0.000 < 0.05$ , it can be concluded that the hypothesis is accepted. This means that there is an influence of counseling with a balanced counseling strategy - Family Planning (SKB-KB) on the decision to select postpartum family planning (KBPP) in 2024.

**Table 3.** The Influence of Counseling with a Balanced Counseling Strategy - Family Planning (SKB-KB) on the Decision to Selection of Postpartum Family Planning (KBPP) in 2024

Postpartum Family Planning Selection Decision (KBPP)	N	Mean Rank	Sum of Rank	Sig. (2-tailed)
After before	Negative Ranks	0	0.0	0.0
	Positive Ranks	39	20.00	780.00
	Ties	32		
	Total	71		

### Discussion

#### *Overview of Counseling with a Balanced Counseling Strategy-Family Planning (SKB-KB)*

Assessment of the decision to choose postpartum birth control before and after showed a difference of 6.47. The average is 20.00 and the sum of rank is 780.00, there are the same assessments before and after as many as 32 people, which means that before and after the balanced counseling strategy - family planning (SKB-KB) was implemented, there was no change in the initial decision before the intervention. Balanced Counseling Strategy-Family Planning (SKB-KB) is an approach in family planning services which aims to provide balanced information, understanding and support to individuals, couples or families in making decisions related to family planning (Silvia et al. 2022).

The Balanced Counseling Method (SKB) was developed to add alternative family planning (KB) counseling methods that can be used by family planning service providers. This method is provided in the form of online independent learning, so that it can be accessed and studied by health workers, family planning instructors (PKB), and family planning program managers according to their needs (Hernawati et al., 2023). Main objective the purpose of this method is to provide more comprehensive and balanced family planning counseling for family planning acceptors. By implementing the Balanced Counseling Method (SKB), it is hoped that it can improve the quality of family planning counseling provided by family planning service providers, thereby having an impact on increasing satisfaction and choosing the right family planning method by acceptors. Overall, the Balanced Counseling Method (SKB) was developed to enrich the knowledge and abilities of family planning counselors in providing effective counseling for family planning acceptors (Lestari et al., 2021).

Balanced Counseling Strategy (SKB) in Family Planning is a counseling approach developed to assist health workers in providing more comprehensive and balanced family planning counseling for clients. The basic concept of SKB-KB is to focus on the client's family planning needs and choices, with the aim of improving the quality of family planning counseling provided (Ahyani, 2018). In its implementation, SKB-KB utilizes various media, such as counseling aid diagrams which

contain key questions, steps and instructions in the counseling process to assist clients in making decisions. Apart from that, there are also SKB-KB counseling cards which contain basic information and family planning methods, as well as family planning method brochures which provide complete information for each method (Olivia et al., 2021).

The existence of diagram media to help health workers carry out counseling can be more effective in carrying out balanced counseling in accordance with the client's reproductive needs. The implementation of SKB-KB is expected to increase client satisfaction and support the selection of appropriate family planning methods, thereby leading to an increase in the overall quality of family planning services (Olivia et al., 2021). According to Musliah et al. (2021) SKB-KB can increase the accuracy of interactions between officers and clients in family planning services, SKB-KB is easy to carry out, interactive, client-oriented and there are 3 visual memory aids that are used to help family planning counseling namely an algorithm (decision-tree) to assist decisions, a counseling card containing a set of family planning methods and appropriate brochures for each method (Litvin et al., 2024; Loechl et al., 2023; Wood et al., 2024).

According to Suarayasa et al. (2023), the Balanced Family Planning Counseling Card (SKB-KB) is a visual aid used in the counseling process to help convey information and facilitate discussions between counselors and individuals, couples or families regarding family planning. These cards usually contain information on various topics related to family planning and can be used in counseling sessions to provide better understanding and support informed decision making.

#### *The Influence of Counseling with a Balanced Counseling Strategy-Family Planning (SKB-KB) on the Decision to Select Postpartum Family Planning (KBPP)*

The results of the research show the influence of counseling with a balanced family planning counseling strategy (SKB-KB) on the decision to choose postpartum family planning (KBPP) in 2024. According to de Vatima-Gudino et al. (2023) explains that there is an influence of providing counseling Family planning on the level of knowledge of family planning acceptors before and after being given long-term contraceptive

method counseling. These findings emphasize the importance of implementing effective and balanced family planning counseling to increase acceptor knowledge (Ayalew et al., 2024; Scoten et al., 2024; Yeshitila et al., 2024). With increased understanding, acceptors can make more informed decisions suited to their reproductive needs in selecting long-term family planning methods.

The research results are in line with Davis et al. (2020) which explains that there is an influence of the balanced counseling strategy - Family Planning (SKB-KB) on the behavior of using modern contraception. harmony in finding the positive influence of the Balanced Counseling-Family Planning Strategy (SKB-KB) on the behavior of using modern contraception. Clients who take part in SKB-KB counseling are proven to be more motivated to choose and use modern contraception consistently, and have a higher level of satisfaction with the method chosen. Similar research by Bove et al. (2022) explains that there are differences between ABPK and SKB-KB regarding the coverage of family planning acceptors. The advantage lies in providing SKB-KB counseling. The advantages of SKB-KB compared to other counseling approaches, such as psychotherapy or traditional counseling, include its structured focus on providing specific guidance and support related to family planning and reproductive health.

Decision making Tools (ABPK), lie in providing more comprehensive information, a more individualized approach, more active client involvement, and stronger support and motivation. According to Mariana et al. (2024) there is an influence of counseling using the Balanced Family Planning Counseling Strategy (SKB KB) on maternal knowledge, maternal attitudes and maternal motivation in choosing contraception (Janys & Siflinger, 2024; Nguyen et al., 2019; Powis & Bunkley, 2023). Counseling using SKB KB can be used as an effort to improve respondents' attitudes in choosing contraception. Health workers can provide clear information with pictures of contraceptive devices to respondents so that they are interesting and easy for respondents to respond to.

Based on previous research that found the influence of a balanced family planning counseling strategy (SKB-KB) on the decision to choose family planning, the researchers are of the opinion that the Balanced Family Planning Counseling Strategy (SKB-KB) has several advantages based on theory. First, a client-centered approach respects and values clients in the decision-making process. This is important because it allows clients to be actively involved and build confidence in choosing a contraceptive method that suits their needs.

Second, SKB-KB provides balanced information about various contraceptive methods, thereby enabling

clients to make wiser choices. Third, this strategy increases the client's active participation in the counseling process, which can help build the client's self-confidence. Furthermore, SKB-KB can increase client satisfaction with the contraceptive decisions and choices made. In addition, this strategy can also strengthen the client-service provider relationship, thereby encouraging consistency in contraceptive use. Overall, SKB-KB is an effective and client-centered strategy for improving individual and community reproductive health. By focusing on client empowerment, providing balanced information, and increasing active client participation, this strategy has the potential to improve the quality of family planning counseling services and support the choice of appropriate contraceptive methods (Oliverio et al., 2023).

## Conclusion

Based on the results and discussion of the research results, it can be concluded that: First, the assessment of the decision to select postpartum family planning (KBPP) before providing the Balanced Family Planning Counseling Strategy (SKB-KB) shows an average value of 42.68 with a standard deviation of 9.096, with a postnatal family planning decision assessment score of at least 30 and a maximum of 60. Second, after giving the Balanced Family Planning Counseling Strategy (SKB-KB), the average score increased to 49.01 with a standard deviation of 9.733, and the decision assessment score postnatal family planning selection is a minimum of 30 and a maximum of 70. Third, the average of 71 respondents showed an increase in the postnatal family planning selection decision score (KBPP) with an average positive rank of 20.00 and a sum of rank of 780.00, and there were 32 respondents who showed the same assessment before and after the intervention, which means there was no change in their initial decisions before the intervention. Fourth, the research results show the value of Asymp. Sig (2-Tailed) is 0.000. Because the value  $0.000 < 0.05$ , it can be concluded that the hypothesis is accepted, which means that there is an influence of Counseling with the Balanced Family Planning Counseling Strategy (SKB-KB) on the decision to choose postpartum family planning (KBPP) in 2024. The increase in the average value of the decision to choose family planning after childbirth after counseling shows that the SKB-KB strategy is effective in increasing respondents' awareness and understanding of the importance of family planning. With increasing decisions to use birth control, it can be expected that there will be a decrease in birth rates which will ultimately contribute to a gradual decline in population. Controlling the number of births through an effective family planning program is one way that can help

control population growth, so that existing resources can be utilized more optimally and community welfare can increase.

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### Author Contributions

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### Conflicts of Interest

The research has no conflicts of interest.

### References

- Ahyani, R. (2018). *Hubungan strategi konseling berimbang pada ibu postpartum dengan penggunaan kontrasepsi pasca persalinan di RSU PKU Muhammadiyah Delanggu Klaten*. Universitas Gadjah Mada. Retrieved from [https://etd.repository.ugm.ac.id/home/detail\\_pencarian/132221](https://etd.repository.ugm.ac.id/home/detail_pencarian/132221)
- Ayalew, A. B., Berta, M., Molla, M., & Kebede, H. B. (2024). Determinants and Knowledge of Men on Obstetric Danger Signs: A Community-Based Cross-Sectional Study in Debretabor, Ethiopia. *International Journal of Africa Nursing Sciences*, 20(December 2023), 100652. <https://doi.org/10.1016/j.ijans.2023.100652>
- Bhardwaj, A., Maharjan, S. M., Magar, A. J., Shrestha, R., Dongol, A., Hagaman, A., Heerden, A. V., Caracoglia, J., Gallo, J. J., Murray, S. M., & Kohrt, B. A. (2024). Engaging Husbands in a Digital Mental Health Intervention to Provide Tailored Counseling for Women Experiencing Postpartum Depression: A Mixed Methods Study in Nepal. *SSM - Mental Health*, 6(December), 100340. <https://doi.org/10.1016/j.ssmmh.2024.100340>
- BKKBN. (2024). *Peraturan Badan Kependudukan dan Keluarga Berencana Nasional Nomor 1 Tahun 2024*. Jakarta: BKKBN RI. Retrieved from <https://peraturan.bpk.go.id/Details/282164/perka-bkkbn-no-1-tahun-2024>
- Bove, R., Hellwig, K., Pasquarelli, N., Borriello, F., Dobson, R., Oreja-Guevara, C., Lin, C. J., Zecevic, D., Craveiro, L., McElrath, T., & Vukusic, S. (2022). Ocrelizumab During Pregnancy and Lactation: Rationale and Design of the MINORE and SOPRANINO Studies in Women with MS and Their Infants. *Multiple Sclerosis and Related Disorders*, 64(May), 103963. <https://doi.org/10.1016/j.msard.2022.103963>
- Cooper, C. M., Ahmed, S., Winch, P. J., Pfitzer, A., McKaig, C., & Baqui, A. H. (2014). Findings from the Use of a Narrative Story and Leaflet to Influence Shifts Along the Behavior Change Continuum Toward Postpartum Contraceptive Uptake in Sylhet District, Bangladesh. *Patient Education and Counseling*, 97(3), 376-382. <https://doi.org/10.1016/j.pec.2014.09.007>
- Darmastuti, A. S., Kasiati, K., Laksana, M. A. C., & Dewanti, L. (2021). Effect of Balance Counseling Strategy Towards Knowledge and Attitude in Contraception Among Pregnant Women. *Indonesian Midwifery and Health Sciences Journal*, 4(2), 150-159. <https://doi.org/10.20473/imhsj.v4i2.2020.150-159>
- Davis, M. B., Arany, Z., McNamara, D. M., Goland, S., & Elkayam, U. (2020). Peripartum Cardiomyopathy: JACC State-of-the-Art Review. *Journal of the American College of Cardiology*, 75(2), 207-221. <https://doi.org/10.1016/j.jacc.2019.11.014>
- Duane, M., Martinez, V., Berry, M., & Manhart, M. D. (2022). Evaluation of a Fertility Awareness-Based Shared Decision-Making Tool Part 1: Study Design and Impact on Clinician Knowledge. *PEC Innovation*, 1(February), 100061. <https://doi.org/10.1016/j.pecinn.2022.100061>
- Gardner, W. M., Razo, C., McHugh, T. A., Hagins, H., Vilchis-Tella, V. M., Hennessy, C., Taylor, H. J., Perumal, N., Fuller, K., Cercy, K. M., Zoeckler, L. Z., Chen, C. S., Lim, S. S., Aravkin, A. Y., Arndt, M. B., Bishai, J. D., Burkart, K., Chung, E., Dai, X., ... & Moradi, M. (2023). Prevalence, Years Lived with Disability, and Trends in Anaemia Burden by Severity and Cause, 1990-2021: Findings from the Global Burden of Disease Study 2021. *The Lancet Haematology*, 10(9), e713-e734. [https://doi.org/10.1016/S2352-3026\(23\)00160-6](https://doi.org/10.1016/S2352-3026(23)00160-6)
- Gelagay, A. A., Worku, A. G., Bashah, D. T., Tebeje, N. B., Gebrie, M. H., Yeshita, H. Y., Cherkose, E. A., Ayana, B. A., Lakew, A. M., Asmamaw, D. B., Negash, W. D., Belachew, T. B., Fentie, E. A., & Bitew, D. A. (2023). Factors Affecting Birth Interval Among Mothers in Dabat District, Amhara Regional State, Northwest Ethiopia: A community-Based Cross-Sectional Study, 2022. *Heliyon*, 9(6), e17046. <https://doi.org/10.1016/j.heliyon.2023.e17046>
- Gudino, I. D. V., Stefania, M., & Tanu, A. O. (2024). Pengaruh Pemberian Konseling KB Terhadap Tingkat Pengetahuan Akseptor KB Tentang Metode Kontrasepsi Jangka Panjang Di Puskesmas Lurasik Tahun 2023. *Jurnal Kesehatan Komunitas Santa Elisabeth*, 1(02), 79-89. <https://doi.org/10.5281/zenodo.1780046>

- https://doi.org/10.12538/jkkse-akbidsteli.v1i02.40
- Hernawati, & Susilawati, S. (2023). Implementasi Program Keluarga Berencana (Kb) Pada Wanita Pasangan Usia Subur (Pus) Di Wilayah Pesisir Pantai Desa Bagan Kecamatan Percut Sei Tuan Kabupaten Deli Serdang. *Zahra: Journal Of Health And Medical Research*, 3(3), 230-234. Retrieved from <https://adisampublisher.org/index.php/aisha/article/view/359>
- Janys, L., & Siflinger, B. (2024). Mental Health and Abortions Among Young Women: Time-Varying Unobserved Heterogeneity, Health Behaviors, and Risky Decisions. *Journal of Econometrics*, 238(1), 105580. <https://doi.org/10.1016/j.jeconom.2023.105580>
- Leocata, A. M., Kaiser, B. N., & Puffer, E. S. (2021). Flexible Protocols and Paused Audio Recorders: The Limitations and Possibilities for Technologies of Care in Two Global Mental Health Interventions. *SSM - Mental Health*, 1(September), 100036. <https://doi.org/10.1016/j.ssmmh.2021.100036>
- Lestari, M. W., Musliyah, M., & Yuliastuti, S. (2021). Perbedaan konseling KB menggunakan alat bantu pengambilan keputusan (ABPK) dan strategi konseling berimbang keluarga berencana (SKB-KB) terhadap cakupan akseptor KB. *Jurnal Riset Kebidanan Indonesia*, 5(1), 11-15. <https://doi.org/10.32536/jrki.v5i1.155>
- Lin, A. E., Basson, C. T., Goldmuntz, E., Magoulias, P. L., McDermott, D. A., McDonald-McGinn, D. M., McPherson, E., Morris, C. A., Noonan, J., Nowak, C., Pierpont, M. E., Pyeritz, R. E., Rope, A. F., Zackai, E., & Pober, B. R. (2008). Adults with Genetic Syndromes and Cardiovascular Abnormalities: Clinical History and Management. *Genetics in Medicine*, 10(7), 469-494. <https://doi.org/10.1097/GIM.0b013e3181772111>
- Lindley, K. J., Merz, C. N. B., Asgar, A. W., Bello, N. A., Chandra, S., Davis, M. B., Gomberg-Maitland, M., Gulati, M., Hollier, L. M., Krieger, E. V., Park, K., Silversides, C., Wolfe, N. K., & Pepine, C. J. (2021a). Management of Women with Congenital or Inherited Cardiovascular Disease from Pre-Conception Through Pregnancy and Postpartum: JACC Focus Seminar 2/5. *Journal of the American College of Cardiology*, 77(14), 1778-1798. <https://doi.org/10.1016/j.jacc.2021.02.026>
- Lindley, K. J., Merz, C. N. B., Davis, M. B., Madden, T., Park, K., & Bello, N. A. (2021b). Contraception and Reproductive Planning for Women with Cardiovascular Disease: JACC Focus Seminar 5/5. *Journal of the American College of Cardiology*, 77(14), 1823-1834. <https://doi.org/10.1016/j.jacc.2021.02.026>
- 025
- Litvin, K., Grandner, G. W., Phillips, E., Sherburne, L., Craig, H. C., Phan, K. A., Patel, A. N., & Dickin, K. L. (2024). How Do Social and Behavioral Change Interventions Respond to Social Norms to Improve Women's Diets in Low- and Middle-Income Countries? A Scoping Review. *Current Developments in Nutrition*, 8(6), 103772. <https://doi.org/10.1016/j.cdnut.2024.103772>
- Loechl, C. U., Datta-Mitra, A., Fenlason, L., Green, R., Hackl, L., Itzkowitz, L., Koso-Thomas, M., Moorthy, D., Owino, V. O., Pachón, H., Stoffel, N., Zimmerman, M. B., & Raiten, D. J. (2023). Approaches to Address the Anemia Challenge. *Journal of Nutrition*, 153(July), S42-S59. <https://doi.org/10.1016/j.jn.2023.07.017>
- Mariana, S., Haryanti, D., Ningsih, N. K., & Gustinainah, G. (2024). Pengaruh Konseling Menggunakan Strategi Konseling Berimbang Keluarga Berencana (SKB KB) Terhadap Perilaku Ibu dalam Memilih Kontrasepsi di Puskesmas Pembantu Kuala Keritang Tahun 2022. *Jurnal Ilmiah Universitas Batanghari Jambi*, 24(1), 235-241. <http://dx.doi.org/10.33087/jiuj.v24i1.3722>
- Mbunge, E., & Sibiya, M. N. (2024). Mobile Health Interventions for Improving Maternal and Child Health Outcomes in South Africa: a Systematic Review. *Global Health Journal*, 8(3), 103-112. <https://doi.org/10.1016/j.glohj.2024.08.002>
- Musliyah, M. W. L., & Yuliastuti, S. (2021). Perbedaan konseling KB menggunakan alat bantu pengambilan keputusan (ABPK) dan strategi konseling berimbang keluarga berencana (SKB-KB) terhadap cakupan akseptor KB. *Jurnal Riset Kebidanan Indonesia ISSN*, 5(1), 19-23. Retrieved from <http://www.ejournal-aipkema.or.id/index.php/jrki/article/view/155>
- Nguyen, G., Costenbader, E., Plourde, K. F., Kerner, B., & Igras, S. (2019). Scaling-Up Normative Change Interventions for Adolescent and Youth Reproductive Health: An Examination of the Evidence. *Journal of Adolescent Health*, 64(4), S16-S30. <https://doi.org/10.1016/j.jadohealth.2019.01.004>
- Obure, C. D., Jacobs, R., Guinness, L., Mayhew, S., Vassall, A., Abuya, T., Askew, I., Birdthistle, I., Church, K., Colombini, M., du-Preez, N. F., Kikuvi, J., Kimani, J., Kivunaga, J., Mak, J., Mayhew, S. H., Michaels-Igbokwe, C., Mutemwa, R., Ndigwa, C., ... & Zhou, W. (2016). Does Integration of HIV and Sexual and Reproductive Health Services Improve Technical Efficiency in Kenya and Swaziland? An Application of a Two-Stage Semi Parametric Approach Incorporating Quality Measures. *Social Science and Medicine*, 151, 147-156. <https://doi.org/10.1016/j.socscimed.2016.03.030>

- <https://doi.org/10.1016/j.socscimed.2016.01.013>
- Oliva, A., Stefani, S., Venditti, M., & Di Domenico, E. G. (2021). Biofilm-related infections in gram-positive bacteria and the potential role of the long-acting agent dalbavancin. *Frontiers in microbiology*, 12, 749685.
- <https://doi.org/10.3389/fmicb.2021.749685>
- Oliverio, A. L., Lewallen, M., Hladunewich, M. A., Kalpakjian, C. Z., Weber, K., Hawley, S. T., & Nunes, J. W. (2023). Supporting Patient-Centered Pregnancy Counseling in Nephrology Care: A Semistructured Interview Study of Patients and Nephrologists. *Kidney International Reports*, 8(11), 2235–2242. <https://doi.org/10.1016/j.ekir.2023.08.010>
- Powis, R., & Bunkley, E. N. (2023). Handbooks and Health Interpreters: How Men Are Assets for Their Pregnant Partners in Senegal. *Social Science and Medicine*, 331(March), 116074. <https://doi.org/10.1016/j.socscimed.2023.116074>
- Rice, W. S., Redd, S. K., Luke, A. A., Komro, K., Arriola, K. J., & Hall, K. S. (2022). Dispersion of Contraceptive Access Policies Across the United States from 2006 to 2021. *Preventive Medicine Reports*, 27(October), 101827. <https://doi.org/10.1016/j.pmedr.2022.101827>
- Salam, R. A., Faqqah, A., Sajjad, N., Lassi, Z. S., Das, J. K., Kaufman, M., & Bhutta, Z. A. (2016). Improving Adolescent Sexual and Reproductive Health: A Systematic Review of Potential Interventions. *Journal of Adolescent Health*, 59(2), S11–S28. <https://doi.org/10.1016/j.jadohealth.2016.05.022>
- Scoten, O., Tabi, K., Paquette, V., Carrion, P., Ryan, D., Radonjic, N. V., Whitham, E. A., & Hippman, C. (2024). Attention-Deficit/Hyperactivity Disorder in Pregnancy and the Postpartum Period. *American Journal of Obstetrics and Gynecology*, 231(1), 19–35. <https://doi.org/10.1016/j.ajog.2024.02.297>
- Sharkey, T., Wall, K. M., Parker, R., Tichacek, A., Papas-DeLuca, K. A., Kilembe, W., Inambao, M., Malama, K., Hoagland, A., Peeling, R., & Allen, S. (2021). A Cluster Randomized Trial to Reduce HIV Risk from Outside Partnerships in Zambian HIV-Negative Couples Using a Novel Behavioral Intervention, "Strengthening Our Vows": Study Protocol and Baseline Data. *Contemporary Clinical Trials Communications*, 24, 100850. <https://doi.org/10.1016/j.concctc.2021.100850>
- Silvia, D., Ratnasari, F., & Winarni, L. M. (2022). Literature Review: Pemberian Konseling Keluarga Berencana terhadap Pengambilan Keputusan Akseptor Memilih Keluarga Berencana Pasca Persalinan. *COMSERVA: Jurnal Penelitian dan Pengabdian Masyarakat*, 1(12), 1205-1213. <https://doi.org/10.59141/comserva.v1i12.195>
- Suarayasa, K., Hidayat, M. I., & Gau, R. (2023). Faktor Resiko Kejadian Hipertensi Pada Lansia (Risk Factors of Hypertension in Elderly). *Jurnal Medical Profession (Medpro)*, 5(3), 253-258. Retrieved from <https://jurnal.fk.untad.ac.id/index.php/medpro/article/view/1151>
- Tumlinson, K., Britton, L. E., Williams, C. R., Wambua, D. M., Onyango, D. O., & Senderowicz, L. (2022). Provider Verbal Disrespect in the Provision of Family Planning in Public-Sector Facilities in Western Kenya. *SSM - Qualitative Research in Health*, 2, 100178. <https://doi.org/10.1016/j.ssmqr.2022.100178>
- Vernon, V., Patel, J., Cieri-Hutcherson, N. E., Arellano, R., Elmore, H., Griffin, B. L., Mitzel, K., Moyeno, W. M., O'Connell, M. B., Pelaccio, K., & Lodise, N. M. (2023). The Impact of COVID-19 on Select Considerations in Patients of Reproductive Age: Brief Talking Points for Pharmacists. *Journal of the American Pharmacists Association*, 63(3), 720–724. <https://doi.org/10.1016/j.japh.2023.01.003>
- Wood, F. E., Dickin, K. L., Sherburne, L., Diakite, M., Boubacar, A., Pollak, M., & Lundgren, R. (2024). Social Norms: A Missing Ingredient of Programs Seeking to Foster Nutrition Agency. *Current Developments in Nutrition*, 8(9), 104440. <https://doi.org/10.1016/j.cdnut.2024.104440>
- Yeshitila, Y. G., Gold, L., Abimanyi-Ochom, J., Riggs, E., Daba, T. T., & Le, H. N. D. (2024). Effectiveness and Cost-Effectiveness of Models of Maternity Care for Women from Migrant and Refugee Backgrounds in High-Income Countries: A Systematic Review. *Social Science and Medicine*, 358(June). <https://doi.org/10.1016/j.socscimed.2024.117250>