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Implementation Of Balanced Counseling Strategy In Postpartum Family Planning Decision-Making: A Scoping Review

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ABSTRACT

Background: Postpartum family planning (PPFP) is a critical intervention for improving maternal and infant health and preventing unintended pregnancies. The quality of counseling plays a key role in supporting informed and sustainable contraceptive decision-making. The Balanced Counseling Strategy (BCS) is a patient-centered counseling approach designed to assist clients in making informed choices aligned with their needs and preferences. Objectives: This study aims to map the scientific evidence on the implementation of the Balanced Counseling Strategy (BCS) in postpartum family planning decision-making.
Method: This study employed a scoping review design based on the Arksey and O'Malley framework, further refined by the Joanna Briggs Institute (JBI) guidelines. Literature searches were conducted in PubMed, ScienceDirect, Wiley Online Library, and Google Scholar for articles published between 2020 and 2025. A total of 19 articles met the inclusion criteria and were analyzed using thematic synthesis.
Result: The findings identified seven main themes, including the effectiveness of BCS in improving knowledge, attitudes, and contraceptive decision-making, increased uptake of long-term contraceptive methods, the importance of patient-centered counseling, healthcare provider capacity, and the influence of sociocultural and health system factors. Several studies reported statistically significant improvements in contraceptive decision-making outcomes following BCS implementation. Conclusion: The Balanced Counseling Strategy is an effective and relevant approach for supporting postpartum family planning decision-making. Its success is influenced by healthcare provider capacity, sociocultural context, and health system support. Strengthening provider training, addressing workload challenges, and integrating BCS into routine maternal health services are essential to optimize its implementation.
Conclusion: The Balanced Counseling Strategy is an effective and relevant approach for supporting postpartum family planning decision-making. Its success is influenced by healthcare provider capacity, sociocultural context, and health system support. Strengthening provider training, addressing workload challenges, and integrating BCS into routine maternal health services are essential to optimize its implementation.

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INTRODUCTION

Postpartum family planning is an important strategy for reducing unintended pregnancies, improving maternal and infant health, and supporting the sustainability of reproductive health programs (Tesfu et al., 2022). The postpartum period is a crucial phase because during this time women experience biological, psychological, and social conditions that significantly influence their decisions about contraceptive use (WHO Recommendations on Antenatal Care for a Positive Pregnancy Experience, n.d.). Poor decisions during this period can increase the risk of closely spaced pregnancies, maternal complications, and negative effects on the wellbeing of both mother and child (Hutcheon et al., 2019).

Postpartum family planning is an important intervention for improving maternal and infant health and preventing unintended pregnancies. The quality of counseling plays a major role in supporting appropriate and sustained contraceptive decision-making. The Balanced Counseling Strategy was developed as a patient-centered counseling approach to help clients make informed decisions that align with their individual preferences.

One of the main challenges in postpartum family planning services is the suboptimal quality of counseling (Bhan et al., 2025). One-directional, rushed, or overly target-focused counseling can lead women to choose contraceptive methods without sufficient understanding. This contributes to low user satisfaction, high rates of contraceptive discontinuation, and low uptake of long-term contraceptive methods.

In response to these challenges, the Balanced Counseling Strategy was developed as a counseling approach that places the client at the center of decision-making through patient-centered care (Warren et al., 2022). This strategy aims to deliver contraceptive information objectively, systematically, and in a balanced manner, while encouraging clients' active involvement in the decision-making process based on their needs, health conditions, and personal preferences. In midwifery services, midwives play a strategic role as counseling facilitators who significantly influence the quality of postpartum family planning decisions.

Although previous studies have examined the effectiveness of the Balanced Counseling Strategy (BCS), most have primarily focused on quantitative outcomes such as knowledge improvement and contraceptive uptake. Limited evidence has comprehensively mapped the implementation aspects of BCS, including women's experiences, healthcare provider roles, and health system factors within postpartum family planning contexts. Therefore, this scoping review provides a broader synthesis by integrating multiple dimensions of BCS implementation, including clinical, behavioral, and system-level perspectives.

Therefore, this study aims to systematically map and synthesize the existing scientific evidence regarding the implementation of the Balanced Counseling Strategy (BCS) in postpartum family planning decision-making, as well as to identify key themes, research characteristics, and gaps in the current literature

METHOD

Research Design

This study used a scoping review design to map the scientific evidence on the implementation of the Balanced Counseling Strategy in postpartum family planning decision-making. The scoping review approach was selected because the research topic has been examined through various designs and contexts, necessitating a comprehensive literature mapping (Levac et al., 2010).

Conducting a scoping review with reference to the framework approach developed by Arksey and O'Malley, which consists of five main stages, namely 1) identifying research questions, 2) identifying relevant studies, 3) selecting studies based on inclusion and exclusion criteria, 4)

charting and extracting data, and 5) grouping, summarizing, and reporting the results systematically (Arksey & O'Malley, n.d.). This framework was then reinforced by further methodological development by the Joanna Briggs Institutes.

Protocol and Registration

This scoping review did not have a formally registered protocol in a specific registration database. However, the review was conducted systematically with reference to the Arksey and O'Malley framework (Arksey & Malley, n.d.) as well as methodological guidance from the Joanna Briggs Institute to ensure transparency and methodological accuracy.

Conceptual Framework

The conceptual framework used is Population, Concept, and Context (PCC) (Trismanjaya Hulu et al., 2025), with the Population (P) of postpartum mothers, partners/husbands, and health workers. The Concept (C) is the implementation of Balanced Counseling Strategies and the Context (C) of postpartum family planning services.

Literature Search Strategy

A systematic literature search was conducted using the PubMed, ScienceDirect, Wiley Online Library, and Google Scholar databases. The keywords used included postpartum family planning, balanced counseling strategy, decision making, and contraception. Articles published between 2020 and 2025 were considered in the search.

Inclusion and Exclusion Criteria

Included articles are quantitative, qualitative, or mixed methods primary research, as well as scoping reviews or systematic reviews that discuss family planning counseling based on the Balanced Counseling Strategy in the postpartum context. Editorials, and articles without clear research methods are excluded.

Data Selection and Extraction

The article selection process was carried out through the stages of identification, duplication removal, title and abstract screening, and full-text review. Articles that met the inclusion criteria were then extracted using a data table to collect information related to research design, participants, intervention type, and main findings.

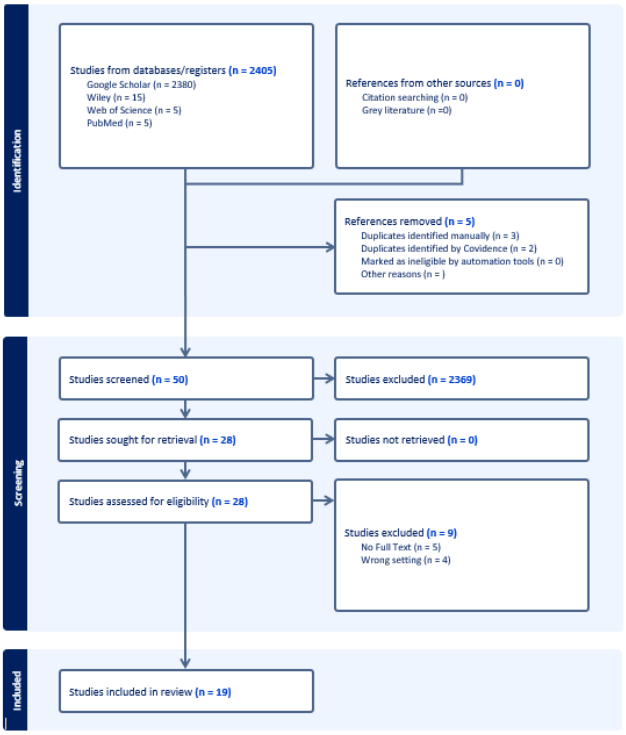

Figure 1. PRISMA Flow Diagram

Table 1. Data Charting

Code	Author & Year	Study Title	Country	Population/ Subject	Intervention (BCS)	Design & Method	Key Outcome	Key Findings
A1	Warren et al., 2022	Design, Adaptation, and Diffusion of an Innovative Tool to Support Contraceptive Decision-Making (BCS+) (Warren et al., 2022)	USA	Family planning clients and providers	Balanced Counseling Strategy Plus (BCS+)	Text & opinion, peer reviewed	Contraceptive decision-making	BCS+ supports shared decision-making and informed contraceptive choices
A2	Palinggi et al., 2021	Effect of Balanced Counseling Strategy on Attitude, Subjective Norm, and Intention (Palinggi et al., 2021)	Indonesia	Women of reproductive age	FP-Balanced Counseling Strategy	Quasi-experimental pretest-posttest design with control group	Attitude, subjective norm, and intention	Significant improvement in attitudes, subjective norms, and intentions in the intervention group
A3	Meekers et al., 2024	Tools for Patient-Centred Family Planning Counselling: A Scoping Review(Meekers et al., 2024)	USA	Literature (33 documents)	Patient-centered family planning counseling tool	Scoping review	Patient-centered care	Six tools were found; evidence of impact on family planning outcomes is still limited

A4	Iriani et al., 2025	Upaya Peningkatan Penggunaan KB Pasca Salin melalui SKB(Iriani & Agustini, 2025)	Indonesia	Postpartum mother	Balanced Counseling Strategy for family planning	Quantitative cross-sectional study	Knowledge and family planning choice	Knowledge increased and changes in family planning choices occurred after delivery
A5	Akbar et al., 2025	Strategi Konseling Berimbang dan Pemilihan MKJP pada Ibu Postpartum(Burhani Akbar et al., 2025)	Indonesia	Postpartum mother	Balanced Counseling Strategy for family planning	Quasi-experimental pretest-posttest design with control group	Selection of long-term contraceptive methods	Significant difference in long-term contraceptive method selection (p=0,018)
A6	Hernawati et al., 2022	Hubungan SKB pada Ibu Hamil dengan Pemilihan KB MKJP (Hernawati & Susilawati, 2023)	Indonesia	Pregnant woman in the third trimester	Balanced Counseling Strategy for family planning	Analytical cross-sectional	Selection of long-term contraceptive methods	Significant relationship between the Balanced Counseling Strategy and long-term contraceptive method selection (p=0,004)
A7	Haryani et al., 2022	Penerapan Konseling KB dengan SKB pada Bidan (Haryani et al., 2022)	Indonesia	Midwife	Training on Balanced Counseling Strategy for postpartum family planning counseling	Community service	Counseling skills	Midwives' skills improved and supported the family planning program
A8	Yulianita et al., 2023	Pengaruh SKB terhadap Pengambilan Keputusan KB Ibu Hamil (Yulianita et al., 2023)	Indonesia	Pregnant woman in the third trimester	Balanced Counseling Strategy for family planning	Quasi-experiment	Family planning decision-making	Significant difference before and after counseling (p<0,05)
A9	Winarso et al., 2025	Efektivitas SKB Pascasalin terhadap Pemilihan MKJP (Winarso et al., 2025)	Indonesia	Pregnant woman in the third trimester	Balanced Counseling Strategy for postpartum family planning	One-group pretest-posttest	Selection of long-term contraceptive methods	Counseling has a significant effect (p=0,008)
A10	Ningsi et al., 2025	Peningkatan Kapasitas Bidan melalui SKB KBPP(Kapasitas Bidan Melalui Penerapan Strategi Konseling Berimbang KBPP	Indonesia	Midwife	Implementation of the Balanced Counseling Strategy for postpartum family planning	Pretest-posttest	Midwife capacity	Knowledge score increased from 75 to 85

		untuk Meningkatkan Cakupan MKJP di Puskesmas Kassi-Kassi et al., 2025)						
A11	Rosida et al., 2024	Pengaruh SKB terhadap Sikap Penggunaan AKDR (Rosida et al., n.d.)	Indonesia	Postpartum mother	Balanced Counseling Strategy for family planning	One-group pre-experimental design	Attitude toward intrauterine device (IUD) use	Positive attitude increased to 73% (p=0,002)
A12	Mariana et al., 2024	Pengaruh Konseling SKB terhadap Perilaku Memilih Kontrasepsi (Mariana et al., 2024)	Indonesia	Mother using family planning	Balanced Counseling Strategy for family planning	Non-equivalent groups pre-experimental design	Knowledge, attitude, and motivation	A significant effect was found across all variables
A13	Darmastuti et al., 2021	Effect of BCS on Knowledge and Attitude among Pregnant Women (Darmastuti et al., 2021)	Indonesia	Pregnant mother	Balanced Counseling Strategy	Quasi-experiment with control group	Knowledge and attitude	The intervention group showed a significant increase compared to the control group
A14	Sumiani et al., 2024	Efektivitas Konseling KBPP dengan Roda Klop dan Leaflet (Sumiani & Anggraini, 2024)	Indonesia	Postpartum mother	Postpartum family planning counseling (Klop Wheel & leaflet)	One-group pretest-posttest	PPFP success rate	Effective counseling media increases contraceptive use
A15	Ramadiyanti et al., 2025	Selection of Contraceptive Methods Using SKB (Ramadiyanti et al., 2025)	Indonesia	Postpartum mother	Balanced Counseling Strategy for family planning	Retrospective cohort study	Choosing a birth control method	Husband's support is significantly associated (p=0,001)
A16	Octafian et al., 2024	Balanced Counseling Strategy for Population Suppression(Rahmadiyanti et al., 2024)	Indonesia	Postpartum family planning acceptor	Balanced Counseling Strategy for family planning	Quasi-experiment	PPFP decision	The Balanced Counseling Strategy for Family Planning has a significant influence on contraceptive method choice
A17	Tesfu et al., 2022	Uptake of Postpartum Modern Family Planning in Ethiopia (Tesfu et al., 2022)	Ethiopia	Postpartum woman	Family planning counseling (various studies)	Systematic review & meta-analysis	Uptake PPFP	PPFP prevalence 45.44%; prenatal counseling a key factor

A18	Rai et al., 2025	Barriers and Enablers of Postpartum IUCD Services (Rai et al., 2025)	Nepal	Health workers and policymakers	Counseling and services for postpartum intrauterine contraceptive device (PPIUCD)	Qualitative study	Service implementation	Main barriers: capacity constraints, system priorities, and counseling
A19	Bhan et al., 2025	Women's Reproductive Agency and PPFP in India (Bhan et al., 2025)	India	Postpartum woman	Postpartum family planning counseling	Qualitative study	Reproductive agency	Low reproductive agency, limited counseling, perceived low service quality

Quality assessment and data analysis

Methodological quality assessment was conducted to provide an overview of the strength and reliability of the available evidence. Although in scoping reviews quality assessment is not typically used as an exclusion criterion, methodological appraisal of the included articles was performed using the JBI Critical Appraisal Tools tailored to each study's research design. The collected data were analyzed through thematic synthesis to identify key themes related to the implementation of the Balanced Counseling Strategy.

Table 2. Quality Assessment Article

No	Artikel Code	Critical Appraisal (JBI)	*Result (Grade)*
1	A1	JBI Critical Appraisal Checklist for Text and Opinion Papers	B
2	A2	JBI Critical Appraisal Checklist for Quasi-Experimental Studies	B
3	A3	JBI Critical Appraisal Checklist for Scoping Reviews	A
4	A4	JBI Critical Appraisal Checklist for Quasi-Experimental Studies (control group)	A
5	A5	JBI Critical Appraisal Checklist for Quasi-Experimental Studies	B
6	A6	JBI Critical Appraisal Checklist for Quasi-Experimental Studies (one group)	C
7	A7	JBI Critical Appraisal Checklist for Text and Opinion Papers	C
8	A8	JBI Critical Appraisal Checklist for Quasi-Experimental Studies	C
9	A9	JBI Critical Appraisal Checklist for Analytical Cross-Sectional Studies	B
10	A10	JBI Critical Appraisal Checklist for Quasi-Experimental Studies (one group)	B
11	A11	JBI Critical Appraisal Checklist for Quasi-Experimental Studies (pre-experimental)	C
12	A12	JBI Critical Appraisal Checklist for Quasi-Experimental Studies	B
13	A13	JBI Critical Appraisal Checklist for Systematic Reviews & Meta-Analysis	A
14	A14	JBI Critical Appraisal Checklist for Qualitative Research	A
15	A15	JBI Critical Appraisal Checklist for Analytical Cross-Sectional Studies	B
16	A16	JBI Critical Appraisal Checklist for Quasi-Experimental Studies (one group)	B
17	A17	JBI Critical Appraisal Checklist for Qualitative Research	A
18	A18	JBI Critical Appraisal Checklist for Qualitative Research	A
19	A19	JBI Critical Appraisal Checklist for Qualitative Research	A

RESULTS AND DISCUSSION

Results

Study Characteristics

A total of 19 articles meeting the inclusion criteria were analyzed in this scoping review. The articles comprised quantitative studies, qualitative studies, as well as scoping reviews and systematic reviews. The majority of studies were conducted in Indonesia with a focus on postpartum family planning services, while several studies originated from other developing countries within the context of maternal and child health services

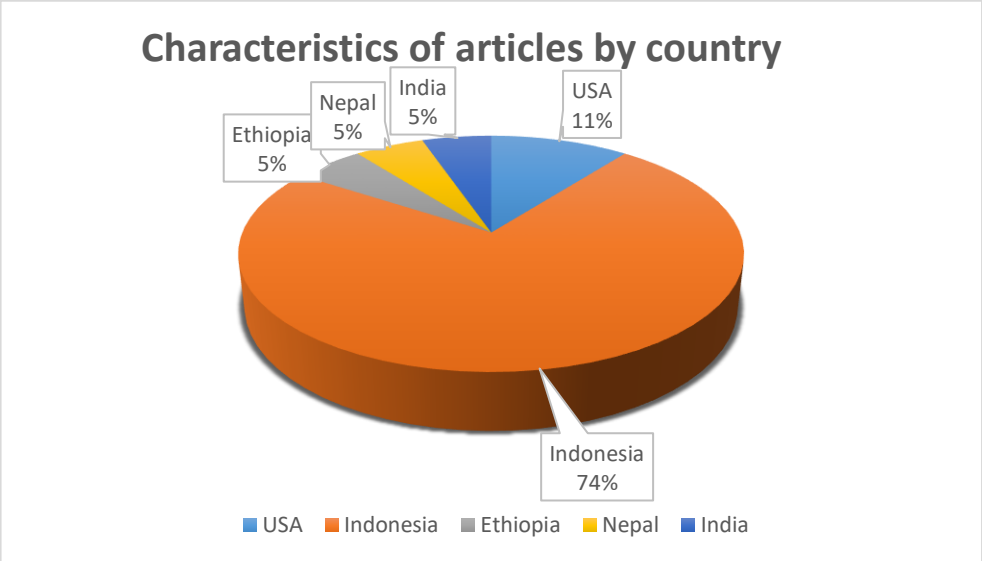

Chart 1. Article Characteristics by Country

This chart shows the distribution of countries of origin of articles included in the scoping review. The majority of articles originated from Indonesia, accounting for 74%, which indicates a high level of interest and research related to Balanced Counseling Strategies in the context of postpartum family planning in Indonesia. Meanwhile, articles from the United States contributed 11%, while 5% of articles came from India, Nepal, and Ethiopia, respectively. These findings indicate that most of the scientific evidence in this scoping review focuses on the context of developing countries, particularly Indonesia, with limited international context variation.

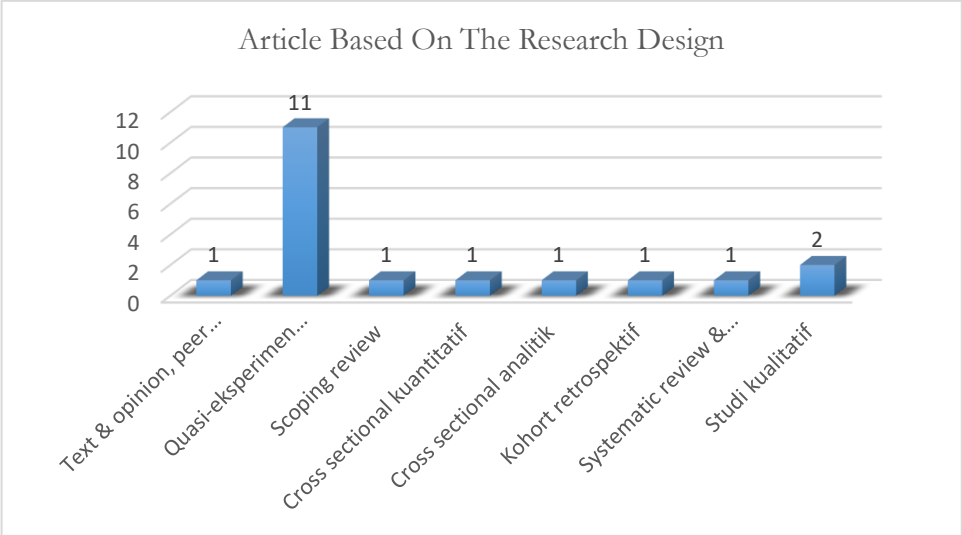

Chart 2. Article Characteristics by Research Design

This chart shows the distribution of research designs from articles included in the scoping review. The majority of articles used a quasi-experimental design with pretest-posttest, namely 11 articles, reflecting the research focus on evaluating the effect of Balanced Counseling Strategies on family planning decision-making. Other research designs included qualitative studies (2 articles), as well as one article each with quantitative cross-sectional, analytical cross-sectional, retrospective cohort, scoping review, systematic review and meta-analysis designs, and text-based and opinion articles. This variety of designs shows that the topic of Balanced Counseling Strategy has been examined through various methodological approaches, although experimental research still dominates the available literature.

Chart 3. Quality of Articles Included in the Scoping Review

This chart shows the results of the methodological quality assessment of articles included in the scoping review based on critical appraisal tools. Most articles were in the good to very good quality category, with 7 articles in Grade A and 8 articles in Grade B. Meanwhile, 4 articles were in Grade C, and there were no articles with Grade D quality. These findings indicate that the majority of scientific evidence used in this scoping review has adequate methodological quality, thus providing a strong basis for mapping the Implementation of Balanced Counseling Strategies in postpartum family planning decision-making.

Main Theme

The results of thematic synthesis identified seven main themes.

Table 3. Analysis and Mapping-Of Research Article

No	Main Theme	Subtheme	Article code
1	Balanced Counseling Strategy (BCS)	Effect of the Balanced Counseling Strategy on postpartum family planning decisions / contraceptive decision-making	(A4, A5, A6, A10, A11, A12, A16)
		Effect of the Balanced Counseling Strategy on mothers' attitudes and knowledge	(A6, A8, A11)
		Effectiveness of the Balanced Counseling Strategy (BCS) in increasing the selection of long-term contraceptive methods	(A4, A5, A9, A15)
2	Selection of Long-Term Contraceptive Methods	Relationship between the Balanced Counseling Strategy and the selection of long-term contraceptive methods	(A4, A5, A9, A15)
		Individual and service-related factors affecting the selection of long-term contraceptive methods	(A9, A13)
3	Postpartum Family Planning (PPFP) counseling	Women's experiences and perceptions of family planning counseling	(A18, A19)
		Decision-making process and women's autonomy	(A18, A19)
		Counseling quality and patient-centered approach	(A1, A3, A18)
4	Implementation of Family Planning (FP) services and the Balanced Counseling Strategy (BCS)	Implementation of the Balanced Counseling Strategy by healthcare providers (midwives)	(A7, A8)
		Implementation barriers and enabling factors	(A14, A17)
		Integration of family planning (FP) services into the health system	(A14, A17)
5	Healthcare provider capacity	Midwife training and capacity building	(A7, A8)
		Role of healthcare providers and policymakers	(A14, A17)
6	Social, cultural, and health system factors	Social and cultural factors in family planning decisions	(A13, A19)
		Policy support and health system factors	(A13, A14, A17)
		Access and quality of family planning (FP) services	(A13, A14)
7	Patient-centered approach in family planning counseling	Decision support tools	(A1, A3)
		Counseling based on client needs and preferences	(A1, A18)
		Improving the quality of counselor-client communication	(A3, A18)

Theme 1. Balanced Counseling Strategy (BCS)

This theme represents the central focus of the reviewed literature and highlights the significant role of BCS in postpartum family planning decision-making.

Effect of BCS on Postpartum Family Planning Decisions

Several studies (A4, A5, A6, A10, A11, A12, A16) demonstrate that the implementation of BCS has a significant effect on mothers' decisions regarding contraceptive method selection. Evidence from quasi-experimental and cross-sectional studies indicates statistically significant improvements in decision-making outcomes following BCS-based counseling ($p=0.018$ in A5 and $p=0.008$ in A9).

Effect of BCS on Knowledge and Attitudes

Articles A6, A8, and A11 consistently report that BCS improves maternal knowledge and promotes positive attitudes toward contraceptive use. These improvements are reflected in increased post-intervention scores and enhanced understanding of contraceptive options among participants.

Effectiveness of BCS in Increasing Long-Term Contraceptive Use

Studies A4, A5, A9, and A15 show that BCS is effective in increasing the selection of long-term contraceptive methods. Quantitative findings indicate significant differences in method choice before and after counseling interventions, suggesting that BCS contributes to more sustainable contraceptive decision-making.

Theme 2. Selection of Long-Term Contraceptive Methods

Relationship between BCS and Long-Term Contraceptive Selection

Articles A4, A5, A9, and A15 consistently demonstrate a positive relationship between the implementation of BCS and increased uptake of long-term contraceptive methods. Client-centered counseling enables women to better evaluate the benefits of long-term methods compared to short-term alternatives.

Influencing Factors in Method Selection

In addition to counseling, individual and service-related factors also influence contraceptive choices. Studies A9 and A13 highlight that education level, parity, partner support, and quality of health services play important roles in determining method selection.

Theme 3. Postpartum Family Planning (PPFP) counseling

Women's Experiences and Perceptions

Qualitative studies (A18, A19) reveal that women value counseling approaches that are interactive, non-judgmental, and allow sufficient time for discussion. Such approaches enhance trust in healthcare providers and improve satisfaction with services.

Decision-Making and Autonomy

Studies A18 and A19 indicate that BCS supports women's autonomy in contraceptive decision-making. Women reported increased confidence and a greater sense of control over their reproductive choices when counseling was conducted in a participatory manner.

Quality of Counseling and Patient-Centered Care

Articles A1, A3, and A18 emphasize the importance of patient-centered counseling approaches. The use of structured tools, such as BCS+, enhances communication and facilitates shared decision-making between clients and healthcare providers.

Theme 4. Implementation of Family Planning and BCS Services

Role of Healthcare Providers

Studies A7 and A8 highlight that midwives play a crucial role in implementing BCS. Improvements in counseling skills were observed following training interventions, indicating that provider competence is a key determinant of successful implementation.

Barriers and Enabling Factors

Barriers identified in studies A14 and A17 include limited service time, high workload among healthcare providers, and insufficient system support. Conversely, training programs and institutional support were identified as key enabling factors.

Integration into Health Systems

Articles A14 and A17 demonstrate that integrating family planning services into broader maternal and child health programs enhances access and improves the quality of postpartum family planning services.

Theme 5. Health workforce capacity

Training and Capacity Building

Studies A7 and A8 report that structured training programs significantly improve midwives' knowledge and counseling skills. For example, study A10 reported an increase in knowledge scores from 75 to 85 following BCS training.

Role of Providers and Policymakers

Articles A14 and A17 emphasize the importance of collaboration between healthcare providers and policymakers in creating supportive environments for BCS implementation.

Theme 6. Social, Cultural, and Health System Factors

Sociocultural Influences

Studies A13 and A19 highlight that cultural norms and partner support significantly influence contraceptive decision-making. In particular, husband support was found to be significantly associated with contraceptive choice ($p=0.001$ in A15).

Policy and Health System Support

Articles A13, A14, and A17 indicate that supportive policies and well-functioning health systems are essential for effective implementation of BCS.

Access and Service Quality

Limited access to services and variations in service quality remain challenges, as reported in studies A13 and A14.

Theme 7. Patient-Centered Approach in Family Planning Counseling

Decision Support Tools

Articles A1 and A3 highlight the role of decision-support tools in enhancing counseling effectiveness and promoting shared decision-making.

Counseling Based on Client Needs

Studies A1 and A18 demonstrate that tailoring counseling to individual needs and preferences increases client engagement and satisfaction.

Communication Quality

Effective communication between healthcare providers and clients is a key component of successful counseling, as emphasized in studies A3 and A18.

Discussion

This scoping review demonstrates that the Balanced Counseling Strategy (BCS) is a relevant and effective approach in supporting postpartum family planning (PPFP) decision-making across various contexts. The findings consistently indicate that BCS contributes not only to improved knowledge and attitudes but also to more informed and sustainable contraceptive choices, particularly in increasing the uptake of long-term contraceptive methods.

The effectiveness of the Balanced Counseling Strategy can be explained through its structured and client-centered approach. By presenting information in a balanced and systematic manner, BCS helps reduce information overload and enables clients to evaluate contraceptive options more clearly. This approach aligns with decision-making theories, which suggest that individuals are more likely to make informed and consistent choices when information is presented in a clear, relevant, and personalized way. Furthermore, the interactive nature of BCS encourages active client participation, which enhances understanding and confidence in contraceptive decision-making.

These findings are consistent with the broader concept of patient-centered care, which emphasizes respect for patients' preferences, values, and individual needs in clinical decision-making. The implementation of BCS reflects a shift in family planning services from provider-driven approaches toward more participatory and individualized care. This indicates that BCS is not only a counseling tool but also part of a broader transformation in healthcare delivery systems.

A key finding of this review is the consistent evidence showing that BCS enhances women's decision-making capacity. Studies included in this review (A4, A5, A6, A10, A11, A12, A16) demonstrate that structured counseling enables women to better understand contraceptive options and make decisions aligned with their personal conditions and preferences. This supports the growing paradigm of empowering women as active decision-makers in reproductive health.

In addition to improving decision-making outcomes, BCS also plays an important role in strengthening women's autonomy. Qualitative findings (A18, A19) highlight that participatory and non-judgmental counseling fosters a sense of control and confidence in reproductive decision-making. This is particularly important in postpartum contexts, where sociocultural influences may limit women's autonomy.

The effectiveness of BCS is also closely linked to the capacity of healthcare providers, particularly midwives. Studies (A7, A8, A10) indicate that training and capacity-building interventions significantly improve counseling quality and provider competence. These findings suggest that successful implementation of BCS depends not only on the counseling framework itself but also on the communication skills and readiness of healthcare providers.

However, the implementation of BCS is influenced by broader health system factors. Several studies (A14, A17) identify barriers such as limited consultation time, high workload among healthcare providers, and insufficient institutional support. These challenges may hinder the consistent application of BCS in routine practice. Therefore, strengthening health systems and ensuring supportive working conditions are essential to optimize counseling effectiveness.

Another important finding is the influence of sociocultural factors on postpartum family planning decision-making. Studies (A13, A15, A19) demonstrate that partner support, cultural norms, and social expectations significantly affect contraceptive choices. In particular, husband support was found to be significantly associated with contraceptive uptake ($p=0.001$ in A15). This suggests that counseling strategies should extend beyond individual women and involve partners and family contexts.

A notable characteristic of the included studies is the dominance of research conducted in Indonesia (74%), as presented in the results section. While this reflects the strong implementation of BCS in Indonesian maternal health services, it also limits the generalizability of the findings to

other contexts with different healthcare systems and cultural settings. Therefore, further studies in diverse geographical regions are needed to strengthen external validity.

Methodologically, most studies employed quasi-experimental designs, which are useful for assessing intervention effectiveness but may have limitations, including potential selection bias and limited control over confounding variables. In addition, the relatively small number of qualitative studies suggests that further research is needed to explore women's experiences and contextual factors in greater depth.

From a practical perspective, this review highlights several important implications. Integrating BCS into routine maternal and child health services can improve the quality of postpartum family planning counseling. Continuous training and capacity-building programs are essential to ensure that healthcare providers can effectively implement BCS. Additionally, addressing systemic barriers such as workload and limited consultation time is critical for optimizing service delivery.

From a policy perspective, policymakers should prioritize the integration of structured counseling approaches such as BCS into national family planning programs. This includes strengthening health workforce capacity, ensuring adequate resource allocation, and developing supportive policies. Furthermore, involving partners and addressing sociocultural factors should be incorporated into comprehensive family planning strategies.

Future research should explore the long-term impact of BCS on contraceptive continuation rates and reproductive health outcomes. Additionally, studies conducted in diverse cultural and healthcare settings are needed to assess the adaptability and scalability of BCS implementation.

Overall, this review demonstrates that BCS is a multidimensional approach operating at individual, provider, and system levels. Its effectiveness depends not only on the counseling process itself but also on the broader context in which it is implemented. Therefore, a comprehensive and integrated approach is required to maximize its impact on postpartum family planning decision-making.

Thematic Synthesis

Overall, this thematic synthesis highlights that the Balanced Counseling Strategy (BCS) is a comprehensive and multidimensional approach to postpartum family planning services. Its effectiveness depends on counseling quality, healthcare provider capacity, and sociocultural and health system support. These findings underscore the need for integrated and sustainable implementation of BCS.

Limitations

This scoping review has several limitations. First, the literature search was limited to articles published between 2020 and 2025 and included selected databases, which may have resulted in the omission of relevant studies. Second, most of the included articles were conducted in Indonesia, which may limit the generalizability of the findings to other contexts. Third, although methodological quality assessment was conducted, the results were not used as exclusion criteria, in line with the nature of scoping reviews. Additionally, the dominance of quasi-experimental designs may introduce methodological limitations, such as potential selection bias and limited control over confounding variables.

CONCLUSION

The Balanced Counseling Strategy (BCS) is an effective and relevant approach in supporting postpartum family planning decision-making. Its implementation contributes to improved knowledge, attitudes, and increased uptake of long-term contraceptive methods. The effectiveness of BCS is influenced by healthcare provider capacity, sociocultural dynamics, and health system support. From a policy perspective, strengthening health workforce capacity, addressing provider workload, and integrating BCS into routine maternal health services are essential to optimize its implementation. Future research should explore the long-term impact of BCS across diverse healthcare settings to enhance its global applicability.

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AUTHOR CONTRIBUTION STATEMENT

All authors participated in the conceptualization and design of the study, formulated the review question using the PCC framework, selected relevant studies, managed the data, and contributed to data collection, synthesis, and reporting of the results. All authors have reviewed and approved the final manuscript.

REFERENCES

Arksey, & Malley. (n.d.). Scoping studies: towards a methodological framework. Retrieved http://journalsonline.tandf.co.uk/

Bhan, N., Thomas, E. E., Kully, G., Ghule, M., Raj, A., McDougal, L., Singh, A., & Averbach, S. (2025). A qualitative analysis of women's reproductive agency and postpartum family planning in Maharashtra, India. PLOS ONE, 20(11 November). https://doi.org/10.1371/journal.pone.0336103

Burhani Akbar, U., Nurchasanah, Y., Ulfah, K., Widaningsih, N., & Sofiyanti Poltekkes Kemenkes Bandung, S. (2025). Strategi Konseling Berimbang Dan Pemilihan Mkjp Pada Ibu Post Partum. Jurnal Sains Kebidanan, 7(2). https://doi.org/10.31983.vx.ix.xxxx

Darmastuti, A. S., Kasiati, K., Cahya Laksana, M. A., & 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

Haryani, L., Cahyati, N., & Dewi Lestari, M. (2022). Penerapan Konseling KB Menggunakan Strategi Konseling Berimbang KB Pasca Persalinan pada Bidan di Wilayah Bandung. Journal of Social Responsibility Projects by Higher Education Forum, 3(2), 145–147. https://doi.org/10.47065/jrespro.v3i2.2827

Hernawati, E., & Susilawati, S. (2023). Hubungan Strategi Konseling Berimbang Pada Ibu Hamil Dengan Pemilihan KB Pasca Persalinan Metode Kontrasepsi Jangka Panjang di UPT Puskesmas Sukarasa. Jurnal Kesehatan Rajawali, 12(2), 21–24. https://doi.org/10.54350/jkr.v12i2.136

Hutcheon, J. A., Nelson, H. D., Stidd, R., Moskosky, S., & Ahrens, K. A. (2019). Short interpregnancy intervals and adverse maternal outcomes in high-resource settings: An updated systematic review. In Paediatric and Perinatal Epidemiology (Vol. 33, Number 1, pp. O48–O59). Blackwell Publishing Ltd. https://doi.org/10.1111/ppe.12518

Iriani, O. S., & Agustini, A. (2025). Upaya Peningkatan Penggunaan KB Pasca Salin Melalui Konseling Menggunakan media Strategi Konseling Berimbang (SKB KB). Jurnal Abdimas Kesehatan (JAK), 299–304. https://doi.org/10.36565/jak.v7i2.853

Jbi Critical Appraisal Tool Jbi Checklist For Quasi-Experimental Studies 2023. (n.d.).

Kapasitas Bidan Melalui Penerapan Strategi Konseling Berimbang KBPP untuk Meningkatkan Cakupan MKJP di Puskesmas Kassi-Kassi, P., Ningsi, A., Devryani, A., Rahmawati Jurusan Kebidanan, R., & Kemenkes Makassar Korespondensi, P. (2025). Media Implementasi Riset Kesehatan. Media Implementasi Riset Kesehatan, 6.

Levac, D., Colquhoun, H., & O'brien, K. K. (2010). Scoping studies: advancing the methodology. http://www.cihr-irsc.ca

Mariana, S., Haryanti, D., Ningsih, N. K., & Gustinainah, G. (2024). Pengaruh Konseling Menggunakan Strategi Konselin 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. https://doi.org/10.33087/jiubj.v24i1.3722

Meekers, D., Elkins, A., & Obozekhai, V. (2024). Tools for patient-centred family planning counselling: A scoping review. In Journal of Global Health (Vol. 14). University of Edinburgh. https://doi.org/10.7189/JOGH.14.04038

Palinggi, R. S., Moedjiono, A. I., Suarayasa, K., Masni, Seweng, A., Amqam, H., Nur, R., & Syam, A. (2021). The effect of balanced counseling strategy family planning against attitude, subjective norm, and intentions on the use of modern contraception behavior in the Singgani Public Health Center work area of Palu city. Gaceta Sanitaria, 35, S140–S144. https://doi.org/10.1016/j.gaceta.2021.10.013

Rahmadiyanti, Octafian, A. C., Purnama, D., Elistari, Saragih, H. R., Susilowati, H., Hairani, I., & Beninda, J. A. (2024). Population Suppression Strategy Through Balanced Family Planning Counseling on the Decision to Select Postpartum Family Planning. Jurnal Penelitian Pendidikan IPA, 10(11), 8461–8468. https://doi.org/10.29303/jppipa.v10i11.8700

Rai, Pramila, O'connor, D. A., Ackerman, I. N., Dangal, G., Rimal, S. P., Rai, Pabitra, & Buchbinder, R. (2025). Clinician and policymaker perspectives on the barriers and enablers to implementing and scaling up integrated postpartum intrauterine contraceptive services within maternity care in Nepal: a qualitative study. www.thelancet.com

Ramadiyanti, A., Sofiyanti, S., Sriwenda, D., Kesehatan, P., & Bandung, K. (2025). Selection of Contraceptive Methods for Postpartum Mothers Using Balanced Counseling Strategies. Jurnal Mahasiswa Kesehatan Masyarakat Universitas Ibn Khaldun Bogor, Indonesia, 8(2), 163–168. https://doi.org/10.32832/pro

Rosida, L., Herawati, Y., Suryani, I., & Risyanti, B. (n.d.). Pengaruh Strategi Konseling Berimbang (Skb) Kb Pada Ibu Postpartum Terhadap Sikap Penggunaan Alat Kontrasepsi Dalam Rahim (Akdr) Di Wilayah Kerja Uptd Puskesmas Ibrahim Adjie.

Sumiani, N., & Anggraini, N. (2024). Efektifitas Konseling KBPP dengan Menggunakan Roda Klop dan Leaflet Terhadap Keberhasilan KB Pasca Persalinan di Puskesmas Kotabaru. Malahayati Nursing Journal, 6(5), 1763–1773. https://doi.org/10.33024/mnj.v6i5.11215

Tesfu, A., Beyene, F., Sendeku, F., Wudineh, K., & Azeze, G. (2022). Uptake of postpartum modern family planning and its associated factors among postpartum women in Ethiopia: A systematic review and meta-analysis. In Heliyon (Vol. 8, Number 1). Elsevier Ltd. https://doi.org/10.1016/j.heliyon.2021.e08712

Trismanjaya Hulu, V., Saragih, J., Wani Damanik, D., Zebua, A., Anita Yunia, E., Rifai, A., Sartika Dewi, R., & Trismanjaya, V. (2025). Scoping Review On Risk Factors Associated With

Hypertension In Indonesia. Jurnal Mutiara Ners, 8(2), 76. https://doi.org/10.51544/jmn.v8i2.6076

Warren, C. E., McClair, T. L., Kirk, K. R., Ndwiga, C., & Yam, E. A. (2022). Design, adaptation, and diffusion of an innovative tool to promote shared contraceptive decision-making: Balanced Counseling Strategy Plus. Gates Open Research, 6, 2. https://doi.org/10.12688/gatesopenres.13477.1

WHO recommendations on antenatal care for a positive pregnancy experience. (n.d.).

Winarso, S. P., Zuhriyatun, F., Poltekkes, W. H., & Semarang, K. (2025). Efektivitas Strategi Konseling Berimbang (Skb-Kb) Pascasalin Terhadap Pemilihan Mkjp Pada Ibu Hamil Trimester III. Jurnal Sains Kebidanan, 7(2). https://doi.org/10.31983/jsk.v7i2.13784

Yulianita, Y., Virawati, D. I., & Suryani, H. (2023). Pengaruh Strategi Konseling Berimbang (Skb) Terhadap Pengambilan Keputusan Ber Keluarga Berencana (Kb) Pada Ibu Hamil Trimester Iii Di Wilayah Puskesmas Tanjung Selor. Aspiration of Health Journal, 1(3), 448–456. https://doi.org/10.55681/aohj.v1i3.189