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Caste, Kinship, and Reproductive Autonomy: Constitutional Challenges to Family Control over Women's Reproductive Decisions

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Abstract

This article examines the relationship between caste and kinship as they relate to women's ability to make decisions about their own reproduction. It utilizes a socio-legal framework to demonstrate that decisions regarding women's reproduction are frequently determined by family and caste based systems instead of simply being the product of individual decision making. Although the Indian Constitution recognizes reproductive freedom as a fundamental right (Article 21) that falls under the umbrella of privacy, dignity and bodily integrity (Suchita Srivastava v. Chandigarh Administration; K.S. Puttaswamy v. Union of India), many women experience the coercive actions of their families, specifically when it comes to family-based castes. It posits that patrilineal inheritance patterns, son preference, family marriage expectations, and the authority of a woman's husband or in-laws all serve as extra-legal mechanisms of reproductive governance that significantly undermine women's decisional autonomy. It draws upon empirical evidence, including studies from Uttar Pradesh and other North Indian contexts that document reproductive coercion in the form of pressure regarding contraception, pregnancy timing, and childbirth, the paper demonstrates how caste and kinship operate as structural sites of rights infringement. It argues that the legal discussions surrounding reproductive rights in India need to evolve away from solely focusing on a state-centred view of reproductive rights violations towards recognizing the family as a significant site of reproductive coercion. Further, it concludes by advocating stronger doctrinal recognition of familial reproductive coercion within constitutional and domestic violence jurisprudence to ensure substantive, rather than merely formal, reproductive autonomy.

Introduction

In the context of contemporary rights and dignity debates in India, reproductive autonomy continues to be an essential component of women's empowerment. The Constitution of India has developed this concept through its jurisprudence on dignity, privacy and decisional liberty, such that reproductive choice can now be seen as a right under Articles 19(1)(a), 21 etc. However, the normative potential of these rights remains unrealized in many women's lives.[1] Women

1 Gauri Pillai, "The Privacy–Equality Synthesis: Framing Reproductive

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do not exercise their reproductive choices freely in practice but are instead influenced by strong patriarchal structures of power, particularly those based on caste and kinship.

Choices about when to conceive (the time gap between marriages and first births); access to contraceptive services; whether or not to continue with or terminate a pregnancy; and the number and gender composition of children are all commonly regulated by families, especially husbands and mothers-in-law. Families may use various methods to regulate conception including immediate childbirth after marriage; the demand for a son; restricting access to family planning information and services; and making decisions about whether or not to become pregnant, especially if they wish to have another child.

When examined from the perspective of Article 21 of the Constitution of India, which recognizes individuals' right to personal liberty and autonomy over their bodies, the ability of families and communities to restrict women's reproductive options assumes greater constitutional importance. As much of the current legal literature on reproductive rights in India concentrates primarily on government restrictions and limitations regarding access to safe abortions, it fails to adequately examine the restrictive practices applied by families and communities.[2] Based on empirical research conducted in the states of Bihar and Uttar Pradesh, there was found to exist considerable pressure from husbands and mother-in-law to bear children immediately after marriage, and also resistance to adopting birth spacing practices.

Therefore, this article will explore how caste-structured kinship systems impede the realization of women's reproductive freedom and argue that the family should be recognized as a legally meaningful sphere where women experience undue influence/coercion relative to their rights.

Methodology And Research Design

This article employs a qualitative socio-legal research methodology that combines a doctrinal legal analysis of Indian legal framework with an interdisciplinary examination of social and anthropological empirical work concerning caste, kinship and reproductive choice. The doctrinal element was conducted by analysing the constitutional provisions specifically articles 14, 15, & 21; relevant judicial precedent (Suchita Srivastava v. Chandigarh Administration)[3]; and other relevant statutory regimes (Medical Termination of Pregnancy Act 1971; Protection of Women from Domestic Violence Act 2005) to provide a foundation for examining the constitutional basis for reproductive autonomy. A review of the regional studies from Bihar, Uttar Pradesh and Haryana were examined through secondary empirical literature to understand how caste-bound kinship systems affect the ability of women to make their own reproductive decisions. Finally, the article applies a rights-based analytical lens to explore the tension between the de jure guarantees afforded by constitutionally protected reproductive rights and the de facto reproductive coercion experienced within families.

Legal and Conceptual Framework

In order to address the issue of reproductive autonomy in India we need to situate it within the larger body of constitutional doctrine regarding equality, dignity, privacy and bodily integrity. While reproductive decision making has historically been considered a part of medical law and public health policy, its underlying principles are constitutional. Specifically, Articles 14, 15 and 21 of the Constitution of India provide the major legal frameworks through which women's reproductive rights can be defined, protected and vindicated in court.

Article 14, which mandates the principle of equality before the law and equal protection of the laws, plays a unique role when a woman's reproductive choices are influenced by patriarchal and caste based familial structures. Substantively, the requirement for equality embodied in Article 14 obligates courts to recognize women as independent rights bearing

Rights in India" 45(1) *Oxford Journal of Legal Studies* 138–166 (2025).

2 O. Raj, "Constitutional and Criminal Perspectives of Women's Reproductive Rights" 2 *Indian Journal of Integrated Research in Law* 1 (2022).

3 AIR 2010 SC 235.

individuals who have the capacity to make their own reproductive decisions. Women whose reproductive choices are made at the expense of their own agency due to disproportionate levels of control exerted by husbands, in-laws or other members of a woman's caste governed kinship network suffer a structural disadvantage to being treated as equals citizens.

Similarly, Article 15, which outlaws discrimination on the bases of sex, caste, religion, race or place of birth is closely related to Article 14. For example, the level of pressure placed on women to bear sons and produce male offspring; the devaluation of daughters; and the expectation for women to reproduce within caste endogamous marriage arrangements must all be viewed through the lens of intersectional discrimination. In India, discrimination against women typically occurs along lines of both gender and caste. The manner in which women's reproductive capabilities serve to maintain caste purity, facilitate paternal succession and contribute to maintaining social standing makes control over a woman's fertility a form of constitutionally cognizable injury based on both gender and caste discrimination.

The primary source of case law supporting this claim is Article 21, which protects life and personal freedom. The key case in this area of law is Suchita Srivastava v. Chandigarh Administration (2009) in which the Supreme Court unambiguously held that a woman's right to make her own reproductive choices is a necessary element of the personal freedom guaranteed by Article 21.[4] The Court stated that the rights encompassed by "reproductive rights" include the right to carry a pregnancy to term, to deliver a child, and equally importantly, the right not to reproduce. What is particularly important about this case is that the Court identified reproductive choice as an essential aspect of three fundamental constitutional values: dignity, bodily integrity and privacy. Therefore, the Court elevated reproductive choice from a statutory entitlement to a fundamental right. As such, this decision continues to be precedent setting since it establishes that a woman's ability to determine whether she will reproduce is derived from her status as a person with constitutional protections.[5]

Additionally, this precedential position was reinforced by the Supreme Court's ruling in Justice K.S. Puttaswamy v. Union of India (2017), which recognized privacy as a fundamental right under Article 21. The Court established a broad definition of privacy, which includes decisional autonomy, bodily integrity and personal choices regarding intimacy. Importantly, the Court expanded the scope of legal inquiry into how private forms of coercion, particularly those exercised within families may constitute constitutionally cognizable harm. Thus, while family mediated control over use of contraceptives, timing of fertility and continuation or termination of pregnancies may be characterized as private matters they should not be shielded from legal review.

Conceptually, this article uses the concept of reproductive coercion as a juridically relevant category. Reproductive coercion refers to behaviours that obstruct autonomous decision making regarding reproduction including but limited to pressuring someone to become pregnant; preventing a woman from continuing or terminating a pregnancy; interfering with access to contraceptive measures; and forcing someone to choose the sex or quantity of offspring.[6] Although much existing scholarship examines reproductive coercion as primarily an interpersonal relationship between two people, this paper posits that there exists a more comprehensive structural understanding of reproductive coercion. Reproductive coercion in India commonly arises from caste bound kinship

4 Melissa Graham, Greer Lamaro Haintz, Megan Bugden, Caroline de Moel-Mandel, Arielle Donnelly and Hayley McKenzie, "Re-defining Reproductive Coercion Using a Socio-Ecological Lens: A Scoping Review" 23(1) *BMC Public Health* 1371 (2023).

5 Catharine A. MacKinnon, "Sex Equality under the Constitution of India: Problems, Prospects, and 'Personal Laws'" 4(2) *International Journal of Constitutional Law* 181–202 (2006)..

6 Brianna Pike, Leesa Hooker, Desireé LaGrappe and Kristina Edvardsson, "How Reproductive Coercion and Abuse Shapes Survivors' Safety and Life Circumstances: A Systematic Review" *Journal of Family Violence* (Advance Online Publication, 2025).

systems and is facilitated by extended family relationships in many cases e.g., in patrilocal and joint family systems where mothers-in-law, husbands and other extended family members often exercise normative influence over women's reproductive decisions thus creating coercive conditions that are both interpersonal and institutional/caste-mediated. This broader conception is critical to this study's position as it permits courts to see families as sites of violations of constitutional rights rather than simply as neutral areas of private action.

Caste, Kinship, and Family Control over Fertility

It is impossible to consider the question of reproductive autonomy in India without analysing how these questions exist within the broader socio-legal frameworks of caste and kinship. Although constitutional debates typically assume individuals as independent agents of rights, Indian women's reproductive decision making occur in social contexts which function as both a source of support and restriction. Thus, when examining reproductive autonomy, we must look at kinship not simply as a social structure, but as a discipline and normative system governing reproductive behaviour. In many families, especially those bound by caste and patrilineage, the family is a site of informal authority where decisions regarding conception, contraception, whether to carry a pregnancy to term and the method of delivery are made collectively and based on hierarchical relationships rather than individual will. Therefore, reproductive autonomy can be characterized as a socio-legal issue and must be analyzed beyond the limits of state law.

One fundamental aspect of this regulatory environment is the institution of patrilocal marriage. Patrilocal marriage is defined as a situation in which married women move into the home of their husbands after marriage. Through this relocation socially and physically, authority over reproduction is commonly transferred from the married woman's natal family to her marital family. The greater the degree of solidarity among members of the extended family, the more authority is distributed vertically in relation to age, gender, and other criteria within the family. For example, women are usually expected to become pregnant quickly after they get married. They are also expected to have children close together in time. These reproductive expectations are shaped by what all family members expect them to do. Frequently, there is no consideration given to the desires of the woman herself. The empirical literature on kin work and women's status in modern India indicates that reproductive labor continues to provide a means for women to achieve social legitimacy within the marital household.[7] Early childbearing is seen as an indicator of a successful marriage and incorporation into a larger family. Within this structure, there exists the authority of the mothers-in-law who operate outside of statutory laws. Often, this authority includes not only controlling aspects of life within the house but also controlling fertility decisions.[8] Mothers-in-law often serve as enforcers of lineages' expectations to produce heirs and shape decisions about the use of reproductive health care services. Mother-in-law's authority is frequently considered to be outside of the law but still has a quasi-governing effect within the private realm. This is true because mothers-in-law exercise power over women's bodies through informal governance.[9]

7 Nadia Diamond-Smith, Yogesh Vaishnav, Usha Choudhary, Payal Sharma, Ankur Kachhwaha, Tamera Panjalingam, Janelli Vallin, Debangana Das and Lakshmi Gopalakrishnan, "Individual Empowerment and Community Norm Effects of Engaging Young Husbands in Reproductive Health in Rural India: Findings from a Pilot Study" 21(1) *Reproductive Health* 147 (2024).

8 Holly Donahue Singh, "Fertility Control: Reproductive Desires, Kin Work, and Women's Status in Contemporary India" 31(1) *Medical Anthropology Quarterly* 23–39 (2017).

9 Lakshmi Gopalakrishnan, Usha Choudhary, Janelli Vallin, Debangana Das, Payal Sharma, Ankur Kachhwaha, Tamera Panjalingam, Richa Ruwala and Nadia Diamond-Smith, "Implementation and Evaluation of a Family Planning Intervention

The practice of exercising control over women's bodies is closely linked to patrilineal succession. Under patrilineal succession, men pass down property, names, ritual responsibilities and social standing to their sons. Therefore, women's reproductive capabilities are often used to help ensure the continued existence of a man's lineage rather than being recognized as an expression of women's bodily autonomy. Additionally, the tradition of endogamy (marriage within a particular group) helps reinforce the continuation of castes.[10] A key component of maintaining castes through endogamous marriages is regulating women's fertility so that caste boundaries remain intact. In this way, kinship serves as a primary means through which castes reproduce themselves. Control over women's fertility should therefore be understood not just as a matter related to the family but as part of the larger legal-social logic of reproducing castes and patriarchy.

Son preference illustrates perhaps the most clear-cut illustration of how caste, kinship and control over women's fertility intersect. Men are generally seen as the chief bearers of lineage continuity in patrilineal societies with strong caste traditions. Sons are viewed as responsible for carrying out rituals and inheriting property from their ancestors. Therefore, sons are thought of in terms of a unique legal/social status that makes them the carriers of their father's/family's name and caste identity.[11] Daughters are perceived as '*paraya dhan,'* i.e., something that will eventually be transferred to another family when she gets married. This perception reduces the value placed on daughters socially and legally in terms of their natal family and contributes significantly to societal expectations around women's reproduction.

An extreme outcome of this logic is the pressure on women to continually conceive until a son is born. Women may be discouraged from practicing birth control, denied sterilization options or pressured to complete a pregnancy if she believes that it would result in a son. These behaviours clearly violate articles 14, 15 & 21 of the constitution by compelling women to make reproductive decisions based on lineage goals rather than their own autonomy, dignity and rights.

Therefore, the family functions as an illegal coercive site that determines the reproductive choices of women outside of the formalized law. Even though the constitution recognizes women's right to reproductive autonomy, the private sphere is rarely subject to effective legal oversight and allows illegal coercive familial practices to occur with legitimate social/ cultural norms. Examples include: coercing women to stop using birth control or preventing women from obtaining birth spacing techniques due to pressure from their husbands or mothers-in-law; limiting access to various types of reproductive health care service (prenatal care, abortion services and family planning counselling) due to restrictions on women's freedom of movement in patrilocal society; pressuring women for sterilizations immediately following the birth of a son; resisting sterilizations until a son is born; pressuring women to terminate pregnancy if they suspect they are having a daughter; and limiting women's ability to obtain pre-conception or prenatal diagnostic testing for purposes of identifying foetal sex.

In cases involving suspicion of a female foetus, familial pressure to terminate pregnancy must also be read in conjunction with the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994[12], which, while criminalising

Engaging Mothers-in-Law of Young Women in India: A Mixed Methods Pilot Study" 18(1) *Global Health Action* 2554435 (2025).

10 Sreelekha Sanil, "Gendering Inter-Caste Marriages: A Sociological and Anthropological Inquiry of Endogamy" *Contemporary Voice of Dalit* (Advance Online Publication, 2024).

11 Maelys Clement, Pauline Levasseur and Suresh Seetahul, "Sex Ratio and Fertility Preferences in India: A Longitudinal Analysis" 192 *World Development* 107046 (2025).

12 Vivek Khanna and K. M. Gopal, "Pre-Conception and Pre-Natal Diagnostic Techniques Act—Draconian or a Considerate *De Jure* Tamer" 13(4) *International Journal of Reproduction, Contraception, Obstetrics and Gynecology* 1086–

sex selection, does not adequately address the subtle forms of familial coercion that precipitate such outcomes. Therefore, the family needs to be reconceptualized not only as a neutral private space but also as a legally relevant space for understanding rights violations resulting from interlocking systems of oppression (caste, kinship, etc.) affecting women's reproductive autonomy.

Empirical Evidence and Contextual Case Analyses

The empirical data provided below further emphasize the importance of the legal issues described above. Empirical data from north India shows clearly that caste, kinship and family-based authority are deeply involved in shaping women's reproductive experiences. As noted earlier, the available literature indicates that reproductive freedom is often impeded not only by direct interpersonal pressure or violence but also by formalized family and community-based expectations that are shaped by socially constructed caste-based boundaries. The following cases demonstrate, using examples from Uttar Pradesh, Bihar and northern India, that families and communities can act as constitutionally relevant reproductive control mechanisms.

This section reports on a very important empirical study that examines the prevalence and impact of reproductive coercion on women in Uttar Pradesh. Several study results indicate that about 1 in every 8 (or 12%) of women report being subject to reproductive coercion at some time by their current husband(s) or in law(s). These rates are especially interesting. First, we see that 42% of all forms of reproductive coercion occur via husbands alone; second, 48% of all forms of reproductive coercion occurs via in-laws alone; third, 10% of all forms of reproductive coercion occur due to both husbands and in laws; this supports the view that reproductive control is not limited to an individual's intimate partner but is also located in larger extended family units. Of equal import to these statistics is that the study has identified a statistically proven link between coercion and negative reproductive health outcomes. Specifically, the research finds that women who experience reproductive coercion are four to five times more likely than those who do not experience reproductive coercion to become pregnant unintentionally, and they also report significantly lower usage of modern contraception.[13] From a jurisprudential perspective, the empirical connection established here between coercion and violations of decision-making autonomy and bodily integrity protected under Article 21 underscores that reproductive control imposed by families constitutes not just cultural pressure but rather a quantifiable infringement on autonomy protected by the Constitution. Additionally, the study's findings concerning the role of in-laws provide direct empirical support for this study's position that the private sphere, traditionally defined as beyond state reach and therefore outside the realm of constitutional analysis, must now be viewed as a site of recognized rights-violations.

Additionally, there are substantial amounts of data collected by researchers studying early-marriage fertility pressures in married adolescents (ages 15-19) in Bihar and Uttar Pradesh. In this study, one out of five girls interviewed experienced pressure from in-laws to begin conceiving right away after marriage. This finding is of great concern with regard to early marriages and the rights to make reproductive choices. Further, this pressure was more prevalent in joint-family and patrilocal households where the young wife had little ability to influence reproductive decisions.[14] The study identifies a strong link between this form of pressure and early-marriage pronatalism. Furthermore, the

1090 (2024).

13 Jay G. Silverman, Sabrina C. Boyce, Nandita Dehingia, Nirmala Rao, Deepali Chandurkar, Priya Nanda, Kelsey Hay, Yamini Atmavilas, Niranjan Saggurti and Anita Raj, "Reproductive Coercion in Uttar Pradesh, India: Prevalence and Associations with Partner Violence and Reproductive Health" 9 *SSM – Population Health* 100484 (2019).

14 Anmol Dixit, Nandita Bhan, Tarik Benmarhnia, Elizabeth Reed, Susan M. Kiene, Jay G. Silverman and Anita Raj, "The Association Between Early-in-Marriage Fertility Pressure from In-Laws and Family Planning Behaviors Among Married Adolescent Girls in Bihar and Uttar Pradesh, India" 18(1) *Reproductive Health* 60 (2021).

study establishes a broad interconnection between the pressure placed on young wives to produce children quickly and other aspects of the patriarchal system such as child marriage, female subordination, and reduced personal agency. Moreover, this study documented the fact that many of these girls have limited access to means for spacing births, as well as poor communication opportunities regarding family size.

This case study is highly relevant due to the manner in which reproductive coercion occurs, often beginning prior to the woman obtaining meaningful agency within her home during the initial stages of marriage. In a legal sense this type of familial coercion raises prominent issues regarding the definition of autonomy provided in Article 21, and whether formal rights can be rendered ineffective in the face of established kinship authority. Additionally, the empirical data suggests that early marriage in states like Bihar and Uttar Pradesh create a structural vulnerability whereby women's fertility will quickly be subjugated to the expectations of their families.[15]

The North Indian context, specifically in Haryana and surrounding areas, presents another example of how reproductive decision-making is regulated through collective caste governance, honour-based controls and community regulations. Although, this is rarely quantitatively captured in reproductive health surveys, the area's khap panchayats, caste endogamy norms, and honour-based community controls provide an illustrative example of how reproductive choices are controlled by collective caste authorities. In some reported examples, adult women have had their ability to make autonomous decisions about their sexual and reproductive lives subject to interference from their families and communities in regard to both their marriage partner and other aspects of their marriage; especially when those marriages violate caste norms.[16]

The reasoning in Shakti Vahini v. Union of India (2018) extends beyond the right to marry and offers an important constitutional basis for protecting women's reproductive autonomy against coercive familial and caste-based interference, since both marriage choice and fertility decisions lie within the protected sphere of intimate decisional autonomy under Article 21. Although this case primarily deals with a person's ability to choose their own spouse, it has significant implications for a persons' reproductive freedom. In caste-endogamous societies, there are strong expectations regarding what a woman should reproduce after she marries; especially if that marriage is sanctioned by community norms. A woman is expected to reproduce children who preserve caste continuance and if she fails to do so, she may experience family pressure, social shame or even coercive action taken against her. Conversely, when couples marry outside of caste boundaries, there is often a connection between controlling a woman's reproductive abilities and maintaining her community's honour and monitoring that woman. This is evident in many North Indian systems of honour, where a woman's body serves as a symbol of the boundary between castes.[17]

Another legally significant example of this includes pressure to abort in situations where a foetus is thought to be female; again primarily located in parts of north India with a history of low sex ratio. Even though the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 prohibits prenatal sex determination and sex-selective abortions, there continues to be discussion among academics and policymakers about the impact that family pressure plays in causing women to terminate their pregnancy once they discover the gender of their foetus. This is an overt conflict between the family's cultural preferences regarding sons versus the individual rights guaranteed by law including reproductive autonomy and equality.

15 Monika Singh, Chander Shekhar and Jhumka Gupta, "Distribution and Determinants of Early Marriage and Motherhood: A Multilevel and Geospatial Analysis of 707 Districts in India" 24(1) *BMC Public Health* 2844 (2024).

16 Vinod Kumar, "A Sociological Analysis of Customary Laws of Khap Panchayats in India" 1(2) *Journal of Contemporary South Asia* 161–186 (2025).

17 Poulomi Bhattacharya, "'Honor' Killings and Customary Laws: A Case Study of Khap Panchayats in Haryana, India" 5(1) *Violence: An International Journal* 3–29 (2024).

Moreover these case studies demonstrate that reproductive control in India is not solely dependent upon interpersonal relationships. Rather, it is created via three interconnected forms of control: caste, kinship and communal authority. Together, the empirical evidence collected from Uttar Pradesh and Bihar as well as the context of North Indian caste dynamics demonstrate that women's reproductive decisions are often impacted by external forms of authority beyond law which ultimately restricts women from enjoying the constitutional guarantee of autonomy, dignity and equality.

Critical Legal Analysis and Reforms

Indian Constitutional Law has historically approached reproductive rights through the lens of a state-action model (i.e., the legal understanding of reproductive freedom exists as a right against government action whether legislative, regulatory, administrative or governmental), while at the same time, recognizing reproductive autonomy, as embodied in Article 21 of the Constitution, to be part of the broader categories of bodily integrity, decisional privacy and personal dignity. However, the primary conceptual framework, based on the doctrine of vertical rights, provides little guidance for dealing with violations of reproductive autonomy caused by individuals who are horizontally related (e.g., spouses, in-laws, etc.), i.e., those located in the private sphere.

The Protection of Women from Domestic Violence Act 2005 is a prime example of this conceptual shortfall. The Act includes broad definitions of domestic violence which include physical (including reproductive) abuse, sexual, emotional and economic abuse; however, none of these definitions explicitly recognize reproductive coercion (coerced conception), forced use of contraceptives, sabotaging birth control or being pressured to continue a pregnancy as recognizable harms.[18] Thus, amending the legislation so as to specifically recognize reproductive coercion as defined in Section 3 would constitute a significant improvement. In addition to providing precedent for including reproductive coercion within domestic violence as defined in Section 3, comparative jurisprudence provides additional precedent in the form of the Serious Crime Act 2015, and its treatment of coercive and controlling behaviour as justiciable abuse.

Similarly, the judiciary could provide a positive impetus towards recognizing fertility-related coercion and in-law pressure as legally relevant forms of domestic abuse by adopting practices requiring courts to do so. Additionally, state-funded reproductive health programs should develop institutionalized independent informed consent procedures as well as protocols to screen for potential reproductive coercion.

Conclusion

This paper argues that women's reproductive autonomy in India can never be effectively guaranteed through a solely State-based rights approach. Even though the Indian Constitution provides strong legal protection of women's rights to equality (Article 14), dignity (Article 21), privacy (Article 21) and decision-making (Article 21), there are still many ways in which women's reproductive choice continues to be severely limited by their place in society, specifically due to the social power held by kinship systems based on caste. The family remains an important institutional actor in the regulation of both the use of contraception and decisions about when children should be born or conceived. Furthermore, where families are organized in terms of patrilocality and/or patrilineality, they may exert pressure on individuals to reproduce or cease reproducing by using various forms of informal coercion. In this sense, the empirical evidence presented here illustrates how the exercise of such coercion is frequently achieved through men, in-laws, community organizations etc., thereby limiting women's ability to make autonomous decisions. For women to have access to substantive reproductive justice, it is crucial that these non-State forms of coercion are recognized by the law

18 Ramasubramani, P., Krishnamoorthy, Y., Ganesh, K., Kathiresan, L., & Kadir, V. (2024). Association between domestic violence and unintended, terminated pregnancy and complications during pregnancy among Indian women: Findings from nationally representative survey. *Heliyon, 10*(5), e27158.

as being harmful violations of women's rights. If no paradigmatic shift occurs in the way we understand what constitutes legal infringement upon individual rights (i.e., from just recognizing State breaches to also including breaches committed by familial/caste networks) then the constitutional promise of protecting individual reproductive autonomy will continue to exist primarily at a formal level but fail to become a reality.

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