

Abstract

Women's health has historically been marginalized within medical research, resulting in an androcentric healthcare paradigm that overlooks the unique needs of women. Although the rise of FemTech—technology-enabled solutions addressing menstrual health, fertility, pregnancy, sexual wellness, and reproductive health—has begun to challenge this imbalance globally, the Indian context remains significantly underexplored. Addressing this critical gap, the present thesis investigates the enablers and inhibitors influencing both adoption and continuance intention of FemTech apps among Indian women. Guided by a mixed-method research design, the study integrates diverse theoretical frameworks—including Unified Theory of Acceptance and Use of Technology, Health Belief Model, Status Quo Bias Theory, Communication Privacy Management Theory and elements of Diffusion of Innovation and Technology Acceptance Model—to evaluate both facilitators and barriers. The research unfolds across two major studies. In Study 1, Phase 1, qualitative interviews with fourteen women were analyzed using inductive thematic analysis to identify key enablers and barriers. In Phase 2, a conceptual model derived from these analysis was empirically tested using Structural Equation Modeling (SEM) in SmartPLS. Findings reveal that cues to action, self-efficacy, performance expectancy, effort expectancy, and swift trust positively influence adoption, while inertia, perceived ineffectiveness of privacy policies, perceived health information sensitivity, switching cost, and regret avoidance act as major inhibitors. In Phase 3, ten expert evaluations were analyzed using DEMATEL to determine cause-and-effect relationships and provide a ranked structure of factors. Results indicate that the Effort Expectancy is categorized as 'receiver' enablers, while the remaining enablers are classified as 'causal' enablers (dispatchers). Also, all privacy-related factors emerged as causal barriers (dispatchers), impacting inertia, switching

cost, and regret avoidance. Study 2 addresses continuance intention by analyzing user-generated reviews from widely used FemTech apps. Using BERTopic-based machine learning and K-Means clustering, five coherent topics were extracted. Two independent experts then mapped these themes onto TAM and DOI constructs, achieving strong inter-rater agreement. The resulting framework was tested using SEM, and key predictors include perceived enjoyment, complexity, perceived usefulness, and observability. Overall, this thesis offers one of the first comprehensive mixed-method investigations of FemTech adoption and usage in India. It advances the literature by synthesizing multiple frameworks within the FemTech domain, and provides actionable implications for developers, policymakers, and health practitioners.

Keywords: FemTech, Female Health, Technology Adoption, Mixed Methods, Dual Factor Theory.