



# Postpartum Contraceptive Implant Uptake and Continuation among Adolescent Refugees in Cox's Bazar: A Policy Analysis for African Populations

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## Abstract

Adolescent refugees in humanitarian settings face increased risks of rapid repeat pregnancy and adverse maternal health outcomes. The subdermal contraceptive implant is a long-acting, effective method, but its uptake and continued use among postpartum adolescents in these contexts, particularly for African populations, remains inadequately documented. This policy analysis examines the determinants of postpartum contraceptive implant uptake and continuation among adolescent refugees in Cox's Bazar, Bangladesh. Its objective is to extract transferable insights for informing sexual and reproductive health policy for analogous African refugee and host populations. A desk-based policy analysis was undertaken. This included a systematic review of published and grey literature from Cox's Bazar, such as programme reports and evaluations. Policy documents from pertinent humanitarian agencies and African national health systems were analysed thematically to identify barriers, facilitators, and policy deficiencies. The analysis identified predominant structural and social barriers. A central theme was the decisive opposition from male partners and mothers-in-law, frequently based on misconceptions regarding side effects and future fertility. Service delivery challenges, including fragmented postpartum counselling and provider bias, were also significant. Community-based peer support groups emerged as a highly effective facilitator for method continuation. Existing service delivery models in humanitarian contexts often inadequately address the specific socio-cultural and systemic barriers encountered by postpartum adolescents. Policy frameworks require better integration of adolescent-responsive and gender-transformative approaches to enhance implant access and sustained use. Policymakers in African refugee and host settings should: 1) Integrate dedicated, adolescent-friendly counselling into standard postpartum care, 2) Invest in community engagement strategies that proactively involve men and key family influencers, and 3) Strengthen healthcare provider training

on adolescent rights and impartial implant counselling. contraceptive implants, postpartum adolescents, refugees, humanitarian settings, policy analysis, sub-Saharan Africa, sexual and reproductive health. This analysis provides evidence to guide the adaptation of sexual and reproductive health policies and programmes for postpartum adolescents in African refugee contexts, highlighting critical socio-cultural and service delivery factors.

**Keywords:** *Adolescent reproductive health, Humanitarian settings, Sub-Saharan Africa, Long-acting reversible contraception, Postpartum contraception, Policy analysis, Refugee health*

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