

# Delivery of home-based postpartum contraception in rural Guatemala: Primary and secondary three-month outcomes of a cluster-randomized trial

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**Objective:** Does home-based delivery of postpartum contraception, including the Jadelle® contraceptive implant, increase implant uptake at 3 mos?

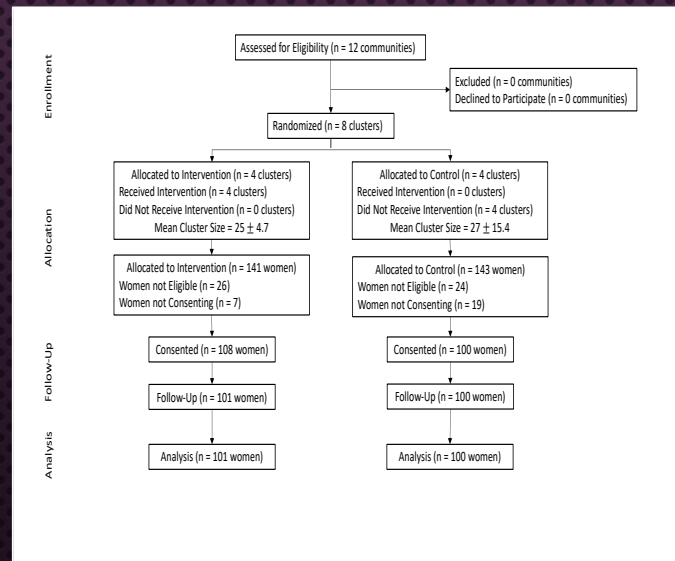
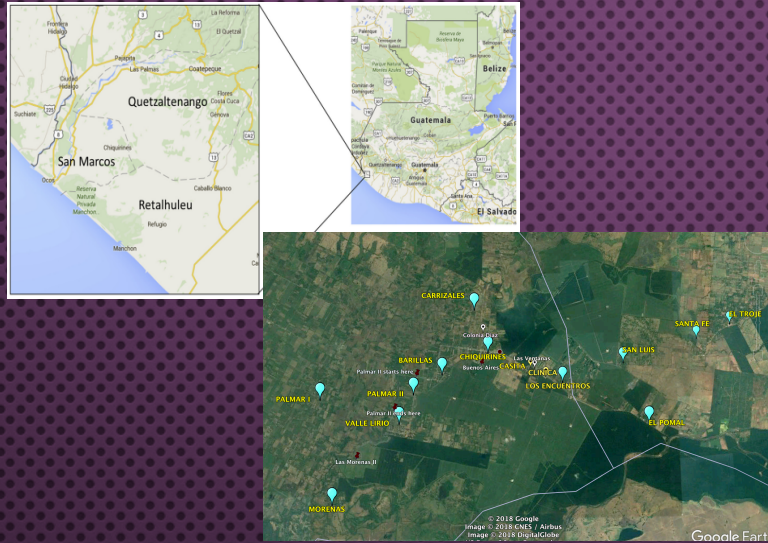
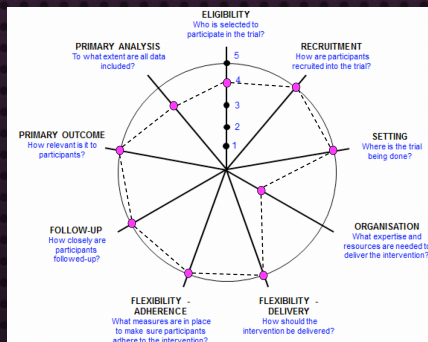
## Implementation Strategies:

- Revising professional roles
- Changing service sites

## Methods:

- Cluster-randomized trial
- Rural Southwest Guatemala
- Community-based nursing program
- Postpartum home visit
- Pills, condoms, injectable, implant

## PRECIS-2:



**Reach:** 208/284 = 73.2%

- 50 not eligible
- 26 not consenting

Effectiveness	Control Clusters (4) Women who Initiated a Method by 3 Months (n = 100, 48.1%)	Intervention Clusters (4) Women who Initiated a Method by 3 Months (n = 108, 51.9%)	P-Value	OR [95% CI]
Using a Method by 3 Months	56 (56.0%)	83 (76.8%)	<0.001	3.6 [1.9,6.9]
Using the Implant at 3 Months	2 (2.0%)	28 (25.9%)	<0.001	18.8 [4.3,81.4]

	Quantitative Nurse Survey	Agree or Strongly Agree	Qualitative Nurse Interview Themes
<b>Adoption (Provider Level)</b>	Nurses Felt the Intervention: -Complicated -Comfortable -Acceptable -Appealing -Liked It -Want to Continue -Good Fit for Everyday Use -Possible to Continue -Happy Trained in Implant Placement -Continue with Cost Subsidization	1, 16.7% (1 missing) 6, 85.7% 7, 100% 7, 100% 7, 100% 7, 100% 7, 100% 7, 100% 6, 85.7% 6, 85.7%	Patient Questions Education on Medical Eligibility Intervention Builds Trust Consent Witness Too Long to Consent
<b>Implementation (Provider Level)</b>	Nurses Felt the Intervention: -Delivered Consistently -Easy to Deliver -Too Much Time to Deliver -Implant Easy to Place in Home Setting	7, 100% 6, 85.7% 3, 42.9% 6, 85.7%	Extended Counseling Formal Training on Methods Formal Education on Methods
<b>Maintenance</b>	NURSES REQUESTED TO START ADMINISTERING REMAINING CONTRACEPTIVES OUTSIDE CONTEXT OF STUDY 7/1/2020		

**Conclusions:** Historical implant use 3.2% → 25.9%. Placement of the implant in the home postpartum setting in rural Guatemala is acceptable, feasible, and sustainable in a community nursing program.