Obstetric Fistula Prevention, Training and Care

Assella School of Health, Adama University Hospital

A Global Approach



Activity and Financial Report

Grant Holder: Women And Health Alliance International Ethiopia

Grant Period: June-August 2014

Reporting Period: June-August2014

Introduction

Ethiopia Fund's faithful financial contributions and compassionate support have been instrumental in reducing the number obstetric fistula victims in the Arsi area. Thanks to you, women who had been stripped of their last shred of dignity have been able to heal and lead happier and fruitful lives.

During the June – August period, WAHA has made great progress in implementing its obstetric fistula prevention, training and patient care program at the Assella Teaching University Hospital.

Comprehensive care was provided to 29 women and the holistic fistula care services at the centre include pre and post operation care, surgery, nutritional support, hygiene care, physiotherapy and reintegration support. As transportation costs are kindly being covered by Ethiopia Fund, financial constraints are no longer a hurdle for fistula sufferers.



Fistula patients at the Centre drinking coffee

The continuous training provided to the care providers is also ensuring that highquality treatment services are maintained.

The community mobilization activities have helped identify fistula sufferers all the while guaranteeing the increase of maternal health services uptake.

Additionally, the infrastructure available for fistula treatment has been significantly improved: the examination room and the ramp have been completed.

During this term (June to August 2014), we had a total of 17424.79USD to spent (1169.79 as the remaining from the previous quarter and 16,255USD transferred on June 20, 2014).

We spent a total of 17,334.40USD during the three months of June to August 2014 with remaining balance of 90.29 USD, however pending payment of 2750.66 USD for one patient monitor. The expenditure details are summarized in the table at the end of this report.

Activities accomplished in the reporting period June - August 2014

I. Construction and Renovation works

To upgrade the operation theatre at the Assella general operation theatre three anesthesia monitor machines ordered and two were delivered for which payment was made, however, payment of one patient monitor is pending and the equipment to be delivered as soon as payment is made.

The Ramp connecting the operation theatre with post operative ward is complete and the remaining 70% of cost was paid.

The agreement was made for the building of dinning place, the Tukul.

II. <u>Supporting fistula care and training integrated into Adama University</u> Hospital

Obstetric fistula treatment

From June to August 2014, 29 women with fistula have been treated and healed at the WAHA Fistula Centre. The funds transferred by Ethiopia Fund have restored the lives of 29 fistula sufferers, including complex cases and previously unsuccessful repairs, who came to the Centre desperately seeking for help: 29 women who have been dehumanized by the crushing consequences of obstetric fistula were operated by WAHA International's expert fistula surgeons and by the local fistula team as well.



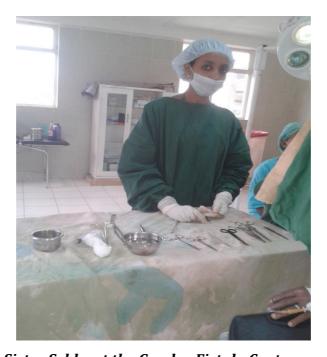
Fistula patients enjoying the morning sun in the garden

The 29 women received holistic obstetric fistula treatment that includes nutritional support, hygiene care, pre and post operational counseling and physiotherapy.

Training of the hospital's fistula care team

Furthermore, during the last quarter, capacity-building activities of the medical staff have continued; and most notably, the nurse assigned at the Fistula Centre received week-long attachment for fistula care experience sharing to other center (at the Fistula Centre in Gondar, which has been recognized and accredited as International Fistula Training Centre by FIGO and the International Fistula Working Group).

This is in addition to what she has already been trained on at the Assella fstula center (focused on patient reception, diagnostic processes, pre-operative care and preparations, instrumental list, preparation and aseptic technique, including methods of sterilization, intra-operative assistance to the surgeon and postoperative cares).



Sister Seble, at the Gondar Fistula Centre.

The nurse was particularly enthusiastic to have gained considerable knowledge on pre and post operative counseling.

In the after-math of the training, Seble has started organizing traditional coffee ceremony sessions for the patients at the Fistula Centre as part as of her counseling strategy.



Sister Seble making coffee for the patients

III. Infrastructural development

In line with the all-encompassing renovation works that were carried out throughout 2013, the infrastructure available for obstetric fistula care is being upgraded with the support of the Ethiopia Fund. The several infrastructural developments have been instrumental in shaping a high-quality working set-up for the care providers and, most important, a privacy secured treatment environment for the patients.

• Examination room

Thanks to the Ethiopia Fund's kind contributions, WAHA International Ethiopia has been able to ensure that the fistula patients' physical examination will take place in a hospitable and reassuring atmosphere. To this end, a separate examination room has been set up next to the Fistula Centre.



The examination room

The examination room has become fully operational, enabling patients to benefit from an intimate and confidential environment. In light of this new development, both the patients and the care providers have expressed their enthusiasm. The nurses have particularly noted the fact this new set-up has facilitated the counseling process.

Ramp

Along with the examination room, a ramp access has been established at the Fistula Centre in Assella. The funds from Ethiopia Fund have made possible this major infrastructural improvement. Food, medical equipment as well as laundry loads are to be transported on trolleys using the newly-establish ramp.

On the same line of thoughts, the ramp has been crucial in facilitating the transportation of patients to postoperative ward directly from operation theatre.





The ramp

III. Community outreach for case identification and prevention

In the framework of a community outreach program, patient recruitment has being carried out primarily through radio announcements in the last quarter. This activity has been central in addressing gap in community education on the nature of obstetric fistula and the available treatment services.

IV. Free transport for women presenting for obstetric fistula treatment

Transport costs major hurdles to accessing adequate fistula care. Ethiopia Fund's donations have covered all transportation costs for 29 fistula sufferers: thanks to the grant, the women were able to reach the Centre and return home without being discouraged by insurmountable financial constraints.

V. Facilitating the social reintegration of fistula survivors

Building on the successful reintegration measures that were implemented in 2013, WAHA has continued providing a reintegration package funded by Ethiopia Fund to fistula patients treated at the Centre.

The reintegration package, which includes a stipend of 2,000 birr to start income generating activities, a blanket as well as new dress, was distributed to the 10 women most vulnerable women as to help them re-build both severed social ties and their status in the community.

Outlook

There is still a long way to go to eradicate obstetric fistula from Ethiopia, but generous gifts from donors like you give us the financial and moral support needed to continue our mission.

During the upcoming quarter, WAHA aims to strength the community mobilization activities both to prevent and identify cases of obstetric fistula. On the infrastructural development front we aim to start the construction of the toukoul in the garden and continue to upgrade the operating room with the third patient monitor.

The training activities will continue ensuring that standard care is provided at the Centre while an increasing number of fistulas will have the opportunity to benefit from the comprehensive fistula treatment program.

Table: Summary of expenditure during the months of June to August 2014.

		June- Aug Cost		Pending	Balance
Item	Description	In Birr	in @ 19.5 rate	payment	
	Ramp connecting operation				
	room with Fistula ward; 70%				
Construction	of the total cost	19968	1024		
Patient Treatment cost					
	200 USD per patient treated	113,100.00	5,800.00		
	50% of salary of the				
Part-time gynecologist	gynecologist assigned to the				
	Fistula Centre	45,360.00	2,326.15		
Equipment for Operation					
theatre	Patient Monitor , 3	107,250.00	5,501.32	<mark>2750.66</mark>	
Dedication of 5 nurses to	Top up to nurses' salary - per				
the fistula ward	month	6,900.00	353.85		
Cleaning staff	Salary of 2 cleaners and 1				
	launderer	6,000.00	307.69		
	The reintegration package				
Reintegration after fistula	Includes a micro-stipend of				
surgery	2000 birr, covers a new				
	clothes- per case	20,000.00	1,025.64		
Transport of patients	For fistula patients before and				
Transport of patients	after surgery - per case	19,965.00	1,023.85		
Community outreach	Radio announcement	16422.00	842.15		
Support of midwife	Support of underprivileged				
students	midwifery students	3000.00	153.85		
	Total	337,997.00	17,334.40		90.29 USD