

Expanding support for high quality

Obstetric Fistula Prevention, Training and Care at

Arsi University Teaching Hospital

A Global Approach to Obsteric Fistula Prevention and Care

Women and Health Alliance International Ethiopia

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Introduction

In Ethiopia, as high as 85 % of all births take place without a skilled health worker. The 2014 Mini Ethiopian Demographic Health Survey noted that the majority of women do not give birth at health facilities and do not seek antenatal consultations, largely due to traditional beliefs. In a context marked by poor nutrition for girls, the persistence of early marriage, restricted access to health care facilities, women are highly exposed to the risk of contracting obstetric fistula (OF). It is estimated that 3 500 women develop OF every year in Ethiopia: OF is still a major reproductive health concern for women in Ethiopia.

In line with the Ethiopian Government's initiative to eradicate OF by 2020, WAHA has continued to contribute to the battle against OF. In 2014, Ethiopia Fund's faithful financial contributions have been crucial in reducing the number obstetric fistula victims in the Arsi area. Thanks to Ethiopia Fund, WAHA has made great progress in implementing its obstetric fistula prevention, training and patient care program at the Assella fistula center of the Arsi Teaching University Hospital.

Comprehensive care was provided to 138 women. The holistic 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 that prevent them from accessing care.

In keeping with the large-scale renovation works that were carried out throughout 2013, the standard of the fistula care center was kept through continuous rehabilitation works. An examination room that offers a reassuring atmosphere was set up; a ramp that facilitates the transportation of patients was also established. Most notably, a toukoul that creates a home-like feeling for the patients was set up in the garden.

Despite the achievements in 2014, it is still critical to continue supporting free of charge-high quality obstetric fistula treatment, case identification and sustainable way of reintegration, as too many women are still suffering from this horrendous disability.

Project summary

The successful holistic strategy that we have implemented, and that we seek to continue developing, combines and integrates medical activities in a much larger, more comprehensive framework.

Partnering with the University Teaching Hospital of Adama (at Assella Hospital) we continue providing fistula care and training services integrated into the teaching and medical care services of this public institution.

About 150 women with fistula are being treated every year at this center and as a result of maximized campaign to eradicate obstetric fistula from Ethiopia, the number of cases accessing the center might not be less.

The fistula program is based on activities that focus on different angles of interventions:

- Community mobilization (case identification and prevention)
- Transport of women presenting for obstetric fistula operations
- Treatment of obstetric fistula and other pelvic floor disorders
- Pre and post-operation counselling and physiotherapy services
- Training of staff in diverse fistula care and prevention services
- Continuous rehabilitation of the fistula center, to keep the standard
- Social reintegration measures

In order to build local expertise in fistula care, in-service competency based training of obstetric fistula care is given as continuous medical education, integrated into the routine of teaching and patient care at the university hospital.

The most disadvantaged among the treated women with obstetric fistula will be covered in sustainable reintegration program (skill training and production of quality materials for sale).

Nurses and midwives are continuously trained in friendly reception of women with fistula; assessment and diagnosis of obstetric fistula cases; pre and post operative care; processing and care of instruments for fistula repair; infection-prevention techniques; assistance in intra-operative care, counselling, discharge and follow-up procedures.

Media campaigns and health education by health professions, supplemented with Information Education Communication/Behavior Change Communication materials are among the various advocacy strategies the program implements to advance case identification and improve access to quality fistula care services.

The program also covers the transportation costs of a woman and one accompanying person to arrive at and to go from the fistula center.

Objective:

The overall objective of the project is to reduce the burden of fistula among women in Arsi.

Specific Objectives for this one year project (March 2015 – February 2016)

Maintenance of the infrastructure available for obstetric fistula (OF) care

- To continue improving the Fistula Ward garden including the constructed 'tokoul'(patient recreation room)
- To maintain the standard of fistula center through maintenance and refurbishment works at the Fistula ward

Community outreach activities for case identification and prevention of Obstetric fistula

- To provide information about fistula and the availability of care to women and their communities
- To reinforce and expand referral links with local NGOs, women's groups, civil society and other development partners working to provide social support to women affected by fistula, before and after surgery

Treatment services

- To support the treatment costs of 150 women with obstetric fistula and other pelvic floor disorders
- To support salary of five nurses from the University of Arsi to work on a rotating basis at the Center
- To cover the salary of the part-time gynecologist

Training in Obstetric Fistula care

- To provide basic refresher training in fistula surgery as well as advanced training for the hospital's physicians
- To provide training for the hospital's fistula care staff, including those working on pre- and post-operative care procedures

Transport

- To cover transportation costs to the treatment centre for 150 women and their accompanying person

Socio-economic reintegration

- To support the economic empowerment of 10 women whose life was shattered by Obstetric Fistula (skills training and establishment of production and selling center)

Midwifery student's financial support

- To continue the support of the 8 midwifery students who are suffering from financial constraints so as to enable them to carry on attending their midwifery school

Expected Outputs

Upgrading the infrastructure available for obstetric fistula care

- The 'tougoul' and the garden will continue to serve as a pleasant recreation area for the patients
- Better equipped and refurbished fistula ward in fulfilling patients' needs

Community outreach activities for case identification and prevention of Obstetric fistula

- An increased number of women suffering from OF identified and referred to the centre
- Increased number of OF identified women benefiting from the fistula treatment in the fistula unit
- Improved community awareness of the importance of accessing maternal health services
- Stronger links with the communities to identify and refer women with fistula

Fistula care

- 150 women suffering from pelvic floor disorders treated

- High-quality pre- and post-operative fistula care service is sustained

Training in Obstetric Fistula care

- Improved competences of the medical professionals to treat and provide care for fistula patients (surgery, pre- and post-operative care) including for more complicated cases

Transport

- **150** women and their accompanying relative supported for transportation to and from the centre

Socio-economic reintegration

- Reintegration support for 10 women treated for Obstetric fistula (skill training and production site/materials provided)
- Improved support services for patients before and after undergoing fistula repair

Midwifery students' financial support

- Midwifery students suffering from financial constraints will receive the required help
- Financial gap will be filled for these 8 students, to continue attending their midwifery school

Project Description

I. Maintenance of the Fistula Ward in Assella School of Health

This project will support basic refreshment works at the fistula ward, as to comply with the patient's basic requirements and needs of comfort. This will include painting works as well as the provision of furnishings such as curtains, bed sheets and other much needed commodities.

In addition the adjoining garden facilities will be improved as to better welcome the fistula patients. This includes support to the planted flowers and the constructed 'tokoul' in the garden.

II. Community outreach programme

The community outreach activities of this project aim to transmit vital information regarding OF through Radio broadcasting and to network with health extension workers to provide continuous community awareness and mobilization activities.

This program strives to create awareness on the preventive measures of OF by the increased uptake of maternal health services in the health facilities. Targeted messages are transmitted to increase the uptake of antenatal and postnatal care and in particular the need for skilled attendance at birth.

III. Providing obstetric fistula care and treatment in Assella Hospital fistula unit

This project proposes to enable 150 women receive free obstetric fistula and other pelvic floor disorders care and treatment. This includes surgery as well as supportive care such as physiotherapeutic and Psychological counselling before and after surgery. WAHA International's expert fistula surgeons will carry out the more complex operations and supervise the local fistula team in operating simple cases of obstetric fistula.

As to enable us facilitate and coordinate the activities of fistula care and treatment the project will be paying a top up salary of the gynaecologist in the fistula unit.

To ensure the continuous quality of fistula care, this project dedicates two nurses who will be exclusively working in the fistula ward. These nurses will guarantee the continuous follow up and care of the fistula patients in the unit. The other nursing staffs that will continue to be allocated by the Assella Hospital to the fistula ward on a rotating basis continue to provide care for the fistula patients accordingly. This project also fully covers the salary of 2 cleaners and 1 launderer to keep the fistula unit at its best.

IV. Training the hospital's fistula care team

One of the fundamental aims of the project is training the local staffs of the fistula care unit in Assella hospital. This project will support the hospital's current fistula care team that needs additional training so as to further increase its ability to independently provide quality care. WAHA International's senior fistula surgeons will provide the training and supervision to gradually build the staff's capacity and enable them independently operate and manage cases with obstetric fistula.

V. Providing transport for women presenting for obstetric fistula operations

As financial barriers can prevent women from seeking care, the proposed project will cover all transportation costs of the 150 treated women to reach the hospital for fistula surgery and follow-up. Usually women will be reimbursed upon arrival at the hospital and receive finance for the return journey.

V. Socio-economic support to the fistula treated women

The stigma associated with fistula is a long and lasting condition which will continue to affect the daily lives of fistula victims even after a successful surgical fistula repair. In addition to psychological counselling to overcome the trauma associated with obstetric fistula, women will receive skills training that aim to empower them economically.

Therefore, providing fistula patients with skills training will give them a great chance to start income generating activities and improve their living conditions. To accomplish this we propose to establish a skill training program for the most disadvantage women treated for obstetric fistula. The trained women will be supported to produce quality materials for sale and economic empowerment.

VI. Midwifery students financial support

The financial support to 8 students from the Assella midwifery school enables them to avoid constraints related to making copy of learning documents (Handouts).

4. Budget

We humbly ask the Ethiopia Fund to support this global approach to fighting obstetric fistula, and to “adopt” the fistula prevention and treatment program at the Assella School of Health. The following budget table presents the costs associated to this fistula prevention and care program including 10% as coordination (admin) cost.

Budget

Budget breakdown 150 cases / 12 months of training and community outreach in US\$					
Item	Description	Qty.	Cost/Rate in USD	Months	Total in USD
Fistula treatment	Hospital stay and surgery costs, materials, drugs and supplies - per case	150	200	12	30,000.00
Part-time gynaecologist	50% of salary of the gynecologist assigned to the Fistula Centre	1	787.4	12	9,448.82
Dedication of 5 nurses to the fistula ward	Top up to nurses' salary - per month	5	52.5	12	3,150.00
Cleaning staff	Salary of 2 cleaners and 1 launderer	3	52.5	12	1,890.00
Reintegration after fistula surgery	The reintegration package includes the skill training and production site development for the 10 women treated for Fistula	10	979.8	12	9,798.00
Transport of patients	For fistula patients before and after surgery - per case	150	30	1	4,500.00
Community outreach for case identification and prevention of obstetric fistula	Radio announcements, posters, community meetings - per month	1	360	12	4,320.00
Support of 8 underprivileged midwifery students	Support of underprivileged midwifery students	8	2,000.00	1	2,000.00
Transportation cost for the two fistula surgeons	The two fistula surgeons who are on standby will travel to the centre for fistula cases	2	594.87	12	7,138.44
Total					72245.26
Admin(coordination)cost; 10% of total cost					7224.5
Total					79,469.76