



Obstetric Fistula Prevention, Training and Care

Assella School of Health, Adama University Hosptial

A Global Approach

Women and Health Alliance International

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1. Project Summary

With the continuous support of the Ethiopia Fund, WAHA International has been able to continue carrying out a successful project in Assella that puts emphasis on capacity-building and high quality obstetric fistula treatment.

Thanks to the grant allocated by the Ethiopia Fund in 2013, patient treatment capacities have greatly been improved, thereby increasing both the number of women with fistula receiving treatment and the quality of the fistula care provided.

All-encompassing renovations of the fistula unit have been carried out including painting works, floor maintenance (tilling), wall reconstruction (ceramic tiles), roof restoration and lavatory maintenance. Electrical and drainage works have also been completed.

The comprehensive refreshment works have been complemented with new furnishings: curtains, bed sheets, bed covers, pillow cases etc. A fully-equipped examination room has been set up and sanitation facilities have also been improved. Similarly, the garden facilities have been upgraded.

Funds from the Ethiopia Fund were also used to support 50% salary of the obstetrician and gynecologist, the top-up salary of one nurse assigned to fistula ward, to cover transportation costs of fistula sufferers, to set up a reintegration package for treated fistula patients, to carry-out much needed community outreach activities to identify cases and prevent new cases of obstetric fistula.

2. Background and needs assessment

Although great strides have been made in the fight against obstetric fistula, Ethiopia remains one of the countries where fistula prevalence is the highest: for every 1,000 women of reproductive age there are 2.2 fistula patients in rural Ethiopia, with an estimated additional 9,000 women becoming victims of obstetric fistula every single year.

Multiple intricate factors such as neglected prolonged labour, harmful traditional practices (early marriage and teenage pregnancy, etc.), low socio-economic status, illiteracy, scarcity of health care units in rural areas and low rate of skilled care during and after pregnancy and delivery, favor the occurrence of obstetric fistula.



Most women with fistula are young girls who suffer not only from their physical disability but also, at a social and psychological level, from the stigma associated to their condition. They need to be operated upon as quickly as possible as to regain a dignified life.

Despite recent accomplishments, continuation of this project appears crucial as a great number of fistula sufferers still need help. Building on the ongoing project collaboration, we ask for the Ethiopia Fund's kind continuous support in implementing our effective strategy underpinned by a global approach that includes treatment, training of medical personnel, infrastructural development, community mobilization activities as well as a social integration program for fistula survivors.

This effective strategy insures that victims of obstetric fistula can return to a life of dignity.

3. The Assella School of Health at Adama University, East Arsi Zone, Ethiopia

Serving a catchment population of 3 million women, the Adama University Teaching Hospital is located in Assela town, in East Arsi, South-East of Ethiopia's capital, Addis Ababa.



The Assella Fistula Center





Fistula Ward – Assella

The Fistula center in the Assella hospital is providing care for women with obstetric fistula from Bale, Arsi, West Hararghe and East Shoa Zones. These are among the most disadvantaged areas of the country and maternal health indicators are very poor, a fact that is reflected in the high burden of cases with obstetric fistula.

Adama University and WAHA International jointly created a new fistula treatment and training service at the **Assella School of Health** that was inaugurated in June 2010; 20 beds are currently reserved for fistula treatment.

Currently only one part-time obstetrician/gynaecologist is dedicated to the fistula ward. One nurse, from the University Hospital, also works in the Fistula Center. However, as to ensure the ongoing high quality of fistula care, 4 more nurses would need to be providing adequate care in the Center, in a rotating basis.

4. Project Narrative

Project Summary

Despite encouraging accomplishments in the fight to eliminate obstetric fistula, continuation of this project appears crucial as a great number of fistula sufferers still need help. As to meet the high demand for obstetric fistula care, WAHA seeks to continue carry-out its multi-pronged, comprehensive project.

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. In this sense, this project is based on several pillars: along with supporting model fistula care and training, community outreach programmes, transport for women presenting for obstetric fistula operations as well as reintegration measures are also included.

**Goal:**

The overall goal of the project is to reduce the burden of fistula among women in Ethiopia by increasing the fistula treatment capacity of Assella School of Health, by training medical staff, by strengthening community outreach and reintegration activities.

Specific Objectives**Upgrading the infrastructure available for obstetric fistula care**

- To equip the operating room and ensure one room dedicated for fistula surgery
- To install ramp access (connecting Operation theatre with post operative ward)
- To carry out continuous repairs and cleaning to sustain standards
- To set-up a toukoul in the garden

Fistula care and training

- To support the surgical repair for 150 women with fistula, including complex cases and previously unsuccessful repairs
- 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
- To hire 2 cleaners and 1 launderer as to insure that the Centre meets basic hygiene standards.
- To ensure that 5 nurses from the University of Adama will work on a rotating basis at the Center
- To cover the top-up salary of the Centre Coordinator as well as the salary of the part-time gynecologist

Transport

- To ensure transportation costs for 150 women accessing fistula care



Community outreach and social re-integration

- To provide information about fistula and the availability of care to women and their communities
- To support the reintegration of 150 women after fistula surgery through a re-integration package, including a micro-stipend of 2000 birr, a blanket and new clothes
- 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

Fistula prevention measures

- To initiate community education activities to encourage women to access maternal health services

Midwifery services

- To support midwifery students suffering from financial constraints

Expected Outputs

Upgrading the infrastructure available for obstetric fistula care

- A ramp will be installed in the Fistula Centre
- The operating room will be better equipped
- Continuous repairs works will maintain that the Centre keeps its current standard
- A toukoul will be set-up in the garden, offering a the patients a pleasant area where they can eat their meals

Fistula care and training

- 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
- 150 fistula operations, including complex cases will be undertaken
- Improved pre- and post-operative fistula care is given; thanks to having a senior nurse exclusively assigned to the fistula ward



Community outreach and social re-integration

- Reintegration support for 150 fistula survivors
- Stronger links with the communities to identify and refer women with fistula
- Improved support services for patients before and after undergoing fistula repair

Transport

- Provision of 150 women's transportation costs for accessing fistula treatment

Fistula prevention measures

- Improved awareness of the importance of accessing maternal health services

Midwifery services

- Midwifery students suffering from financial constraints will receive the required help and continue their training

Project description

I. Supporting fistula care and training integrated into Adama University Hospital

a) Providing obstetric fistula treatment

In 2013, 153 obstetric fistula operations were carried out at the Fistula Center in Assella, 75 of which were supported by the Ethiopia Fund. The Ethiopia Fund had kindly donated 200 USD per patient to cover costs of drugs, food, laundry, consumables and laboratory services. These services were provided by the university hospitals and later on refunded. Additionally, the Ethiopia Fund had also generously covered the costs of necessary equipments and consumables that are not available in the hospital.

For 2014, we are kindly asking for the support of 150 obstetric fistula operations including pre- and post operative care. This includes surgery as well as supportive care such as physiotherapy. Psychological and social support will also be provided before and after surgery.



b) Training the hospital's fistula care team

The lack of qualified medical personnel being one of the barriers to eradicating obstetric fistula, the project seeks to continue increasing training opportunities in fistula treatment for medical students and local health care professionals, thus ensuring a future generation of local fistula surgeons.

This is an essential strategy as it ensures that the project fosters the creation and enhancement of local capacity. Training is being managed and provided by highly experienced Ethiopian obstetric fistula surgeons further highlighting the local ownership of the project.

c) Human resources

- **Gynecologist**

We are seeking the Ethiopia Fund's support to cover 50% of the salary of the part-time gynecologist who will provide pre-operative and post-operative treatment.

- **Dedication of 4 additional nurses to the Fistula Center**

In 2013, only one nurse was allocated by Adama Hospital to the fistula ward. However, as the continuous follow-up provided by the nursing staff is instrumental in insuring high-quality fistula care, increasing the number of nurses will guarantee that follow-up services are available around the clock at the Fistula Center.

We are asking for the Ethiopia Fund's generous support to cover the top-up salaries of the existing nurse as well as of the 4 additional nurses who will provide their services on a rotating basis at the Fistula Center.

- **Coordinator of the Assella Fistula Centre**

The Fistula Center has one coordinator responsible for field activities, like case identification, advocacy and mobilization, training and patient re-integration activities. **We are asking for the Ethiopia Fund's generous support to cover the top-up salary of the Coordinator.**



- *Sanitary services*

As to further insure that the Fistula Centre complies with the patients' basic requirements and needs of comfort, hiring 2 cleaners and 1 launderer has appeared essential. **We are kindly asking the Ethiopia Fund's to cover the salary of the launderer and the 2 cleaners.**

II. Upgrading the infrastructure available for obstetric fistula care

Taking a health system strengthening approach, WAHA is determined to continue building the capacity of the Fistula Centre, thereby enhancing both treatment capacity and quality of the care provided.

In keeping with this strategy, we aim to upgrade the operating room by equipping it with missing items such as **monitors of anaesthesia machine**. Determined to provide the best care possible to the underprivileged and often abused women who come to the Centre seeking help, we also aim to make the women's stay at the Centre as pleasurable and comfortable as possible. In this sense, we plan to install **ramp access** as well as to set up a **toukoul** where the women will be able to enjoy their meals.

In the same line of thought, we also plan to carry out **continuous renovation works** as needed.

We humbly ask the Ethiopia Fund to enable the Centre to reach its full potential by covering costs associated with the upgrade of the OR, continuous renovation works, the installation of the ramp and the construction of the toukoul.

III. Community outreach for case identification and prevention

Community outreach activities are crucial in encouraging women suffering from obstetric fistula to come forward and seek treatment as well as in preventing new cases of obstetric fistula. A community outreach program has been designed and implemented but needs to be further consolidated as to reach out reach a higher number of women suffering from the devastating consequences of obstetric fistula as well as to prevent new cases.

In the framework of this program, patient recruitment is being carried out primarily through radio announcements and community meetings. These activities are central in addressing gap in community education on the nature of obstetric fistula and the available treatment services. Additionally, pregnant women are being educated about the benefits of antenatal care and in-



facility delivery, in the view of reducing risks of contracting obstetric fistula. **We kindly ask for the Ethiopia Fund's continuous support of community outreach activities.**

IV. Providing transport for women presenting for obstetric fistula operations

Transport costs have been identified as major hurdles to accessing adequate fistula care. Given that financial constraints should never prevent women from seeking care, the project also seeks to continue covering the transportation costs of fistula sufferers as to enable them to reach the hospital for fistula surgery and follow-up. **In this sense, we would also like to invite the Ethiopia Fund to continue covering the transportation costs of 150 fistula sufferers as to enable them to reach the hospital for fistula surgery and follow-up.**

V. Facilitating the social reintegration of fistula survivors

The stigma associated with fistula is a long and lasting condition that will continue to affect the daily lives of fistula sufferers even after a successful fistula repair. As such, fistula survivors need help as to overcome this stigma and regain their lost social status and dignity.

As to support the social reintegration process of cured fistula patients, we have established a successful program with the support of the Ethiopia Fund. The reintegration package, which includes a stipend of 2,000 birr to start income generating activities, a blanket to protect them from the cold as well as new dress has proved its effectiveness in 2013 as fistula sufferers treated at the Centre were able to re-build both severed social ties and their status in the community. **Building on the successful results registered in 2013, we ask for the Ethiopia Fund's continuous support of reintegration measures.**

VI. Supporting midwifery students

Midwives play a crucial role in reducing maternal mortality and morbidity as they are at the front line of maternal health services. They are instrumental in averting maternal death and disability. It is thus essential to support the midwifery workforce.

There are currently 150 students enrolled at the Midwifery College in Assella. As most of the students are from disadvantaged families and struggle to focus on their studies due to financial constraints, the project aims to support those students. In collaboration with the Social Services Office, we selected five first year and another five from second year students in dire need of help and offer them financial support.



5. Budget

We invite the Ethiopia Fund to continue supporting this global approach to fighting obstetric fistula. The following budget presents the costs associated to this global fistula prevention and care program.

Supporting fistula treatment, training and prevention at the Assella School of Health, Adama, Ethiopia						
Budget breakdown 150 cases / 12 months of training and community outreach in US\$						Budget in NOK
Item	Description	Qty.	Cost/Rate	Months	Total	Total costs
Fistula treatment	Hospital stay and surgery costs, materials, drugs and supplies - per case	150	USD 200.00	1	30,000.00	181,298 NOK
Supplies and consumables to increase fistula treatment capacity	Supplies and consumables that are not available at the hospital	1	USD 500.00	12	6,000.00	36,260 NOK
Upgrade of Operation Room	monitors for anesthesia machines	3	USD 2,750.66	1	8,251.97	49,869 NOK
Repair works	Continuous repair as needed and cleaning material	1	USD 500.00	12	6,000.00	36,260 NOK
Installation of ramp access	ramp access	1	USD 1,469.82	1	1,469.82	8,883 NOK
Construction of toukoul	Building of a toukoul where the patients will be able to eat their meals	1	USD 1,312.34	1	1,312.34	7,931 NOK
Part-time gynecologist	50% of salary of the gynecologist assigned to the Fistula Centre	1	USD 787.40	12	9,448.82	57,102 NOK
Dedication of 5 nurses to the fistula ward	Top up to nurses' salary - per month	5	USD 52.50	12	3,150.00	19,036 NOK
Cleaning staff	Salary of 2 cleaners and 1 launderer	3	USD 52.50	12	1,890.00	11,422 NOK
Fistula Center coordinator	Top up to the fistula centre's coordinator salary - per month	1	USD 52.50	12	630.00	3,807 NOK
Reintegration after fistula surgery	The reintegration package Includes a micro-stipend of 2000 birr, covers a new clothes- per case	150	USD 121.00	1	18,150.00	109,686 NOK
Transport of patients	For fistula patients before and after surgery - per case	150	USD 30.00	1	4,500.00	27,195 NOK
Community outreach for case identification and prevention of obstetric fistula	Radio announcements, posters, community meetings - per month	1	USD 1,000.00	12	12,000.00	72,519 NOK
Support of underprivileged midwifery students	Support of underprivileged midwifery students		USD 2,000.00	1	2,000.00	12,087 NOK
Total					104,803 USD	633,354 NOK