

# **Elimination of Obstetric Fistula and the Reduction of Newborn Mortality and Morbidity in Liberia**

Script for PowerPoint Updated January 2011

## **Slide 1**

Let me tell you about an excellent project that ZONTA International has funded for several years

## **Slide 2**

It concerns a debilitating injury so many women in the world suffer from: obstetric fistula...and ZONTA's contribution to the fight against fistula.

## **Slide 3**

Obstetric fistula usually develops when a prolonged labor presses an unborn child so tightly in the birth canal that blood flow is cut off to surrounding tissues, causing the tissues to die. This results in a hole that forms between the vagina and the bladder or rectum during prolonged, obstructed labor.

The dismal causes that can lead to obstetric fistula are poverty, lack of education, early marriage, childbirth, and lack of medical care. Obstetric fistula is an injury of childbearing that has been relatively neglected, despite the devastating impact it has on the lives of girls and women. The consequences of fistula are life shattering: The baby usually dies, and the woman is left with chronic incontinence. Because of her inability to control her flow of urine or feces, she is often abandoned, or neglected by her husband and family, and ostracized by her community. Without treatment, her prospects for work and family life are greatly diminished, and she is often left to rely on charity.

One young woman described her life after she developed a fistula: "I thought I should kill myself. You can't walk with people. They laugh at you. You can't travel; you are constantly in pain. It is so uncomfortable when you sleep. You go near people and they say urine smells, and they are looking directly at you and talking in low tones. It hurt so much I thought I should die. You can't work because you are in pain; you are always wet and washing clothes. Your work is just washing pieces of rags."

Fistula is a relatively hidden problem, largely because it affects the most marginalized members of society: young, poor, illiterate women in remote areas. Many never present themselves for treatment. Because they often suffer alone, their terrible injuries may be ignored or misunderstood.

## **Slide 4**

For years, the tragic deaths of 500,000 mothers a year have been more or less invisible. Ninety percent of those deaths occur in Africa and Asia. Progress in reducing these deaths has been slow. Nevertheless, the issue is gaining ground in terms of political commitments and media attention. There is hope. There are successes that point the way to a better future.

## **Slide 5**

UN Secretary General Mr. Ban Ki-Moon addressed the 62nd World Health Assembly on May 19, 2009 with the words:

“There is perhaps no single issue that ties together the security, prosperity and progress of our world than women’s health. Women’s rights are human rights!

Women’s health touches the heart of every issue and the soul of every society. Women are the weavers of the fabric of society...

In my year as Secretary General, I convened leaders from the United Nations’ system, the world of philanthropy, the private sector and civil society to focus on 21st century health priorities. They all agreed: we must begin with maternal health....Maternal health is the mother of all health challenges. Today, maternal mortality is the slowest moving target of all the Millennium Development Goals---and that is an outrage. Together, let us make maternal health the priority it must be. In the 21st century, no woman should have to give her life to give life.”

## **Slide 6**

One of the worst consequences of complications in giving birth is the phenomenon of “obstetric fistula”.

## **Slide 7**

Some 50,000 to 100,000 new cases develop each year. This is a tragic failure to deliver maternal care. To compound the suffering, sometimes it takes months and even years before those afflicted can be cured.

## **Slide 9**

Because of the very high success rate of reconstructive surgery, 90 percent of the fistula patients with an average fistula condition can be repaired.

## **Slide 10**

Liberia is one of the poorest countries in the world. The national net income per person a year is \$130. This situation is the result of 15 years of a cruel civil war. By 1997 the war had destroyed 74% of the hospitals and 71% of the health centers and clinics.

Obstetric fistulae occur disproportionately among impoverished girls and women, especially those who live far away from cities or medical facilities. Not surprisingly, Liberia is a country where the World Health Organization statistics register an appalling frequency of ‘obstetric fistulae’.

## **Slide 11**

This figure is one of the highest globally.

## **Slide 12**

And that's where the United Nations Population Fund Campaign comes in.

UNFPA operates only on donations and will only work with a country that seeks its close cooperation and support. Liberia's Reproductive Health Program creates a framework for a joint effort.

In 2003, UNFPA started the Campaign to End Fistula. Since 2003, UNFPA has secured almost \$30 million in contributions to support countries. The goal is to eliminate fistula by 2015.

More than 12,000 women worldwide have received fistula treatment and care with support of UNFPA.

ZONTA is UNFPA's partner in the Liberia Campaign. Zontians from all over the world have voted at the Convention in Rotterdam to fund the project with \$450,000 until 2010. At the San Antonio Convention in 2010 Zontians voted to continue the funding with another \$500,000. Information and prevention form an integral part of the program.

## **Slide 13**

Offering reconstructive surgery is a major objective of the project.

## **Slide 14**

With Zonta's money, training in state of the art surgery has been offered to 12 Liberian surgeons through December 2009. In addition, 30 midwives and nurses received training.

In order to ensure quality care and treatment; essential drugs and medical equipment, including plastic aprons and sheets, syringes and needles, sutures and antiseptics and detergents; will be provided to 12 selected hospitals in at least 9 counties.

## **Slide 15**

The goal of the campaign is to educate the patients within the two weeks they stay in hospital. It takes two weeks for the tissue to heal. They learn that the fistula is not a curse. They learn that a woman giving birth should seek the support of midwives or doctors... Those young girls in particular should seek competent support before they give birth... That it's best to avoid pregnancies when they're still young.

Practical guidance on how to start a new life is also provided. Nutritional advice as well as financial counseling is offered.

But above all, it is crucial to give moral support. In many cases, it is the first time in many years, if not in their life, that the women receive kind attention and can feel taken good care of.

## **Slide 16**

What is the cost of the surgery, care and training? Giving a woman her life back costs only \$300.

## **Slide 18**

The pictures shows 17 survivors, having undergone successful surgery followed by counseling and skills training through the Liberia Fistula Rehabilitation and Re-Integration Program that receives funds from UNFPA and Zonta. The women were awarded certificates and gifts, and urged to become “ambassadors” and role models for those who do not have the courage or the opportunity to seek help.

### **Slide 19**

Information and awareness raising to prevent the occurrence of fistulae are critical to success. In 2009 a two week information campaign which was supported by local media, as well as fistula survivors, resulted in providing 67 women fistula surgery; and obstetric care for another 300 women. In addition to campaigns, posters, flyers and billboards were created to increase the population’s knowledge.

Raising awareness also includes meetings with influential groups, community and religious leaders and developing an informational documentary.

Zonta’s funding has supported one ward at JFK Hospital in Monrovia, and helped to make the fistula program active in 9 of the 15 Liberian counties. Our support encouraged other donors. Johnson & Johnson, for instance, has pledged funding of the the project from 2009-2011.