

## Addis Ababa Fistula Hospital

### Project Summary 2002

*Teje Kasene's childhood ended long ago. Married at 10 to a man chosen by her parents, she was pregnant by age 13. When the delivery pains started, the village midwife left her in labor for a week. "It was very painful," says Teje. "I couldn't sleep or eat. My baby died inside me," she whispers with a trembling voice.*

*Since then, Teje suffers from fistula, the destruction of the tissues between the vagina, bladder, and/or rectum. Fistula is a common affliction for women who have a prolonged, obstructed labor.*

*Shame and emotional suffering accompany the continuous physical pain. Teje's husband abandoned her because he could not stand the smell of constantly-leaking urine.*

*A woman who was previously treated at the Fistula Hospital urged Teje to go there for treatment. Teje left from her home village in the northern Simien Mountains and walked for two days with her mother to reach the hospital.*

*Thanks to the medical care she received at the Fistula Hospital, funded by World Vision, Teje is now fully recovered.*



Teje Kasene was married at 10, pregnant at 13, and abandoned by her husband at 14. She found healing and hope at the Fistula Hospital supported by World Vision.

### The Need in Ethiopia

The country of Ethiopia is home to a remarkable mosaic of people, languages, and cultures, punctuated by a varied landscape. However, much of the population lacks essential services. Educational opportunities are limited—only 19 percent of children ages 7 to 15 attend school. Approximately 90 percent of Ethiopians earn their living from subsistence farming.

The life expectancy in Ethiopia is short—less than 45 years. A mere 46 percent of the population have access to health services. The doctor-patient ratio in this country is about one to 80,000.

### World Vision's Work in Ethiopia

World Vision first began its ministry in Ethiopia in 1971 when it provided famine relief to refugees from the civil war with Sudan. Between 1971 and 1975, World Vision brought hope to this thirsty land by drilling wells. Over the years, project activities have provided water, improved medical care and educational standards, assisted local churches with evangelism, and helped children living in the streets of

Addis Ababa, the capital city.

From 1981 through 1985, several drought-relief projects were active, providing food, medical aid, and clothing. As drought conditions eased from 1986 to 1990, the priority became restoring pre-drought conditions through operating health centers, providing nutritional education, and distributing food until families became self-sufficient. Projects in Ethiopia over the past 11 years have concentrated on food security, education, health, income generation, and spiritual nurture. World Vision's child sponsorship program began in Ethiopia in 1976, assisting an initial 2,000 children. Today 54,884 children in Ethiopia are sponsored through World Vision donors from the United States.

### Fistula: A Painful Medical Condition

In Ethiopia, parents arrange marriages for their daughters as young as 7 or 8. These girls' bodies are not mature enough to handle pregnancy. Even more complications occur if they have experienced female circumcision. An estimated 90 to 95 percent of women in Ethiopia are circumcised. The scarring that results from female circumcision is a major cause of obstructed labor during delivery.

A lack of proper medical care also contributes to the problem. In modern cities like Addis Ababa, most women receive prenatal care and give birth in a hospital. However, in much of Ethiopia, vast mountains, rivers, and scorching lowlands impede travel and hamper communication. When the average village girl, like Teje, feels the first sharp pain of labor, she is likely a 15-mile walk from the nearest road, let alone a hospital.

Early marriage, female circumcision, and lack of medical care contribute to a high incidence of fistula in Ethiopia. Obstetric fistula is an injury occurring to women following prolonged, unrelieved obstructed labor, whereby an opening develops between the bladder and the vagina, or sometimes between the vagina and the rectum. Women with a fistula suffer from urinary incontinence which, if not managed properly, causes them to smell of urine. This continuous urine leakage makes them vulnerable to urinary tract or other infections and damage to the reproductive organs. The condition is painful and frequently leads to social isolation and abandonment by husbands and others. It may also lead to future inability to carry a child to term.

"Please do not treat me like a saint. Not at all—I am just a doctor, but everything I do is led by God, and He makes no mistakes."

— Dr. Catherine Hamlin, founder of the Fistula Hospital

**A Cure for Fistula**

The operation to close a fistula is often a simple one, and many patients are completely cured and able to bear children again. Within three weeks most women are ready to return home to their villages. The gratitude of patients who receive a cure for this condition is profound, because it offers a return to normal life after months or sometimes years of lonely misery.

The Addis Ababa Fistula Hospital, established in 1974 by Drs. Reginald and Catherine Hamlin, provides surgery for more than 1,200 victims of obstetric fistula every year, completely curing over 90 percent. Upon Dr. C. Hamlin's persistent requests, the Ethiopian government now requires every gynecology student in the country to complete a two-month internship at the Fistula Hospital.

Although the Fistula Hospital charges nothing, most women from rural areas have difficulty getting there for treatment. Some are pushed in wheelbarrows or carried across rugged, rural terrain. Others ride camels or donkeys. Some, unable to read, arrive with signs asking people to guide them to the hospital. When they finally reach the city, they are often thrown off public transportation and refused lodging when hotel maids discover soiled beds.

At the Fistula Hospital, however, they are warmly welcomed. Hospital staff examine them, explain the procedure, and give them an appointment for admittance. With new women arriving almost every day, the 50 hospital beds are always full. If a patient cannot stay nearby with friends or relatives, she joins the 20 or more women who live in the "waiting rooms," small sheds in the hospital compound with beds and places to store their few belongings. As they wait, they help with hospital duties and care for other patients.

Women who come to the Fistula Hospital not only receive help for their physical needs, but spiritual and emotional healing as well. Daily Bible study sessions and literacy classes are held, and the women naturally help care for and support one another.

**Goals for Fiscal Year 2002**

World Vision provides support for the operation of the Fistula Hospital, including surgery and care for

fistula patients and training for health professionals managing the condition. World Vision is working with the Fistula Hospital and other government hospitals to formulate safe motherhood initiatives. These initiatives seek to make pregnancy and childbirth safer for young mothers, especially those who live in rural areas. The primary goal is to prevent unsafe practices in the reproductive process and to provide treatment and surgery closer to rural villages. Additional priorities are capacity-building for health professionals in emergency obstetric care and establishing a well-functioning referral and transport system so that women with complications can get affordable treatment closer to home.

The hospital's goals for the 2002 fiscal year are:

- Enable the hospital to continue performing up to 1,200 operations during the fiscal year for the repair of obstetric fistulae.
- Facilitate outreach visits by Fistula Hospital obstetrician-gynecologists and nursing staff to hospitals at regional and zonal levels, where surgery may be performed.
- Give continued high-level nursing care at the hospital for the patients undergoing operations and supervise physiotherapy for the five to 10 women per year requiring this service.
- Monitor basic hygiene classes and literacy sessions given daily to all long-term patients—usually between five and 20 at any given time.
- Facilitate the upgrading of skills for specialist doctors from other developing countries currently working with fistula patients in their own countries.



Aselefech Gebre, 21, returns to her home village completely cured of fistula. For 20 years, World Vision has supported the Fistula Hospital in Addis Ababa, Ethiopia, thereby ending the suffering and humiliation of women like Aselefech.

**You Can Help**

The total cost to heal the injury of one young fistula patient is about \$250. Women of Vision has pledged \$50,000 in support of the Fistula Hospital for the 2002 fiscal year.

Please pray for the Fistula Hospital and young women like Teje who experience physical and emotional suffering and rejection by their communities. In addition, please prayerfully consider making a gift to this vital project. Your donation to World Vision for the Fistula Hospital will help equip the only fistula hospital in Africa with modern facilities and qualified personnel and will ease the suffering of thousands of African women and girls.



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