



Fistula survivors recover from surgery at a treatment centre in Kano, Nigeria.

HEALING WOUNDS, REPAIRING LIVES—2008 HIGHLIGHTS

Obstetric fistula is a debilitating condition that has left – and continues to leave – hundreds of thousands of women suffering in solitude and shame. It is the result of prolonged, obstructed labour and renders survivors incontinent and frequently isolated. All but eliminated from the developed world, obstetric fistula continues to affect the poorest of the poor: women and girls living in some of the most resource-starved regions in the world.

Today, more than 45 countries in Africa, Asia and the Arab States have joined the Campaign to End Fistula. Because of this unprecedented global effort – and thanks to support from UNFPA, governments, partners and concerned individuals – more and more women are accessing the care needed to prevent and treat fistula and return to full and productive lives.

Since the Campaign's inception in 2003, UNFPA has secured almost US\$30 million in contributions to support countries. The goal? To eliminate fistula by 2015. Progress to date:

- At least 38 countries have completed a situation analysis of fistula prevention and treatment
- More than 25 countries have integrated fistula into relevant national policies and plans
- More than 12,000 women have received fistula treatment and care with support from UNFPA ¹

While many countries were engaged in conducting needs assessments and planning national strategies at the beginning of the Campaign, at the end of 2008 the majority is actively working to prevent and treat obstetric fistula, and assist women in their transition back to social acceptance

2008 HIGHLIGHTS:

- United Nations Secretary-General, Ban Ki-Moon, presented the first-ever report about fistula to Member States in October. The Secretary-General's report outlines efforts to end obstetric fistula and help achieve MDG 5.
- The United Nations Development Programme (UNDP) granted an award of excellence to the Campaign to End Fistula for championing South-South collaboration. The award committee commended the Campaign for its innovative approach.
- 4,000 women received fistula treatment with support from UNFPA ²
- More than 2,000 health personnel received training in fistula prevention, treatment and reintegration.
- Thirteen Campaign countries are supporting fistula survivors to engage in community and national level advocacy through which they sensitize communities, provide peer support, and advocate for improved maternal health.

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Treatment services supported by UNFPA may have also received support from governments and other partners.

- The Campaign recognized the dedication and inspiring work of leaders in the fight against fistula. Seventeen Campaign countries nominated a total of 21 champions - including politicians, physicians, nurses, fistula survivors and journalists, and NGO staff. One of these leaders, Sarah Omega, a fistula survivor and advocate from Kenya, addressed congressional leaders on Capital Hill, saying, “this is my appeal, let us all join together to make maternal health a priority, to increase advocacy and to empower women.”



Fistula survivor Sarah Omega Kidangasi on Capitol Hill May, 2008

Africa Region (37 active countries):

- October 2008 marked the official launch of the Africa Civil Society Network for Fistula Elimination. The Network will mobilize political and community support to help countries in their fight against fistula.
- Many countries are working to reduce the cost of prevention and treatment services. In Ghana treatment will now be free as part of the National Health Insurance Scheme. In Mauritania, UNFPA supported special emergency obstetric funds in districts with high rates of maternal mortality and morbidity, while in Guinea-Bissau support was provided to community-based health insurance programmes.
- Cote d’Ivoire established a pilot centre in the Region of Man—training 12 OB/GYNs and surgeons, 42 midwives and nurses, and 240 community health workers in fistula prevention, treatment and reintegration. Consequently, 254 women were treated and there are plans to scale-up to other regions.
- In Niger, the national network organized an evaluation of social and economic reintegration activities for women treated for fistula. The evaluation highlighted the importance of safe pregnancy education and the benefits of accompanying women on their return home.

Asia and Pacific Region (6 active countries):

- In Bangladesh, the national Government, Dhaka Medical College Hospital and UNFPA organized a regional capacity building workshop where health teams from Timor Leste, Nepal and Pakistan upgraded their skills through information exchange.
- In Pakistan, 7 regional centres now provide free fistula treatment. Additionally, 18 outreach campaigns were conducted throughout the country to make fistula treatment services more accessible for women living in remote areas.

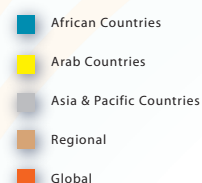
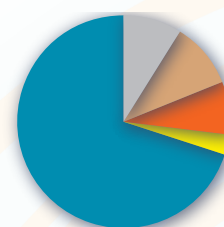
Arab States Region (3 active countries):

- In Sudan and Somalia, surgical outreach campaigns in Puntland, Darfur and southern Sudan, resulted in the treatment of more than 200 women in these complex humanitarian settings.

Campaign Resources

In 2008, the Campaign mobilized US\$6.2 million in contributions. With this funding and contributions from 2007, US\$8.7 million was allocated to 27 countries. Nearly 80 per cent of the funding was provided to the Africa Region, where the needs are greatest.

2008 Allocations of Campaign Funding



The UNFPA-led global Campaign to End Fistula is helping to prevent and treat fistula, and support women after surgery. The Campaign is working in more than 45 countries across Africa, Asia and the Arab region.

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