



WOMEN AND HEALTH ALLIANCE INTERNATIONAL – ETHIOPIA

Financial and activity report

Project name: **Obstetric Fistula Prevention, Training and Care
Assella School of Health
Adama University Hosptial
A Global Approach**

Grant holder: Women and Health Alliance International

Funding received: 28,000 USD

Funding period: April – June 2013



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Introduction

WAHA International is a non-profit, non-governmental organization that works to improve access and uptake of essential healthcare services for women and newborns in disadvantaged communities throughout the world.

The organization was founded in 2009 and has since carried out activities in over twenty countries. In April 2012, WAHA International's Ethiopian chapter was registered and licensed at Ethiopia's Charities and Societies agency as a non-governmental organization authorized to provide treatment to women with obstetric fistula, to improve access, quality and uptake of emergency obstetric care.

WAHA Ethiopia is providing obstetric fistula care services in collaboration with three University Hospitals, supporting access to and uptake of maternal care services through community mobilization and awareness creation activities as well as providing support to district hospitals and health centers.

Thanks to Ethiopia Fund's kind support, WAHA Ethiopia has been making great strides in the fight against obstetric fistula in Assella University Hospital and, more generally, Arsi zone during the last three months (April 2013 – June 2013). Thanks to this support, an urgently required renovation, at the fistula center is ongoing. 25 women were able to receive free obstetric fistula treatment and return to life of dignity. At the same time community mobilization and awareness raising activities aimed to prevent obstetric fistula and direct women to treatment.



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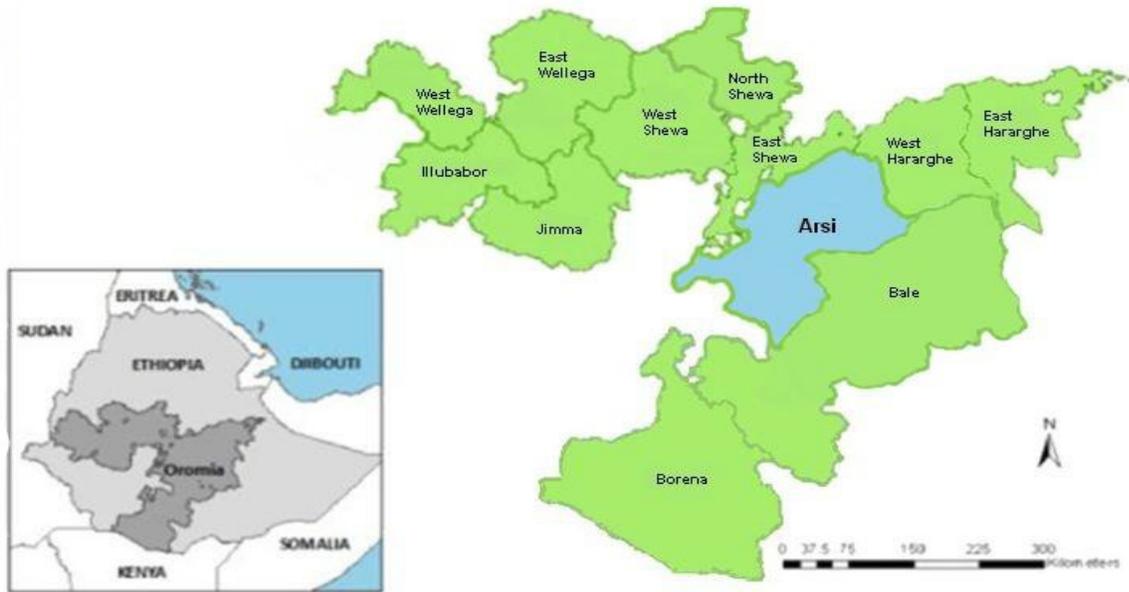


Figure 1. Map of Arsi zone, at the center of Oromiya. Assella is the capital of the zone.



Figure 2. Assella Town



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Activities funded by Ethiopia fund in the last quarter

The Ethiopia Fund made a donation of 28,000 USD to WAHA International on March 7, 2013. However, the bank process took longer than expected hence slightly delaying the planned interventions.

Of this donation we have currently budgeted 27,187.50 USD but we spent **18,763.00 USD** and the expenditure details is listed in the summary table at the end of the report. The remaining **8424.5 USD** will be budgeted for additional activities of the next quarter.

Accomplished activities are detailed as follows:

1. Refreshment works and equipment of fistula ward

As specified in the proposal, we longed to carry-out refreshment works at the fistula ward, as to comply with the patients' basic requirements and needs of comfort.

Originally, the budgeted costs for renovating the fistula ward only included painting works, floor and lavatory maintenance, as well as provision of furnishings (curtains and bed sheets). However, recommendations made by professionals brought us to reevaluate the scope of the work required. As such, though it was not initially planned, renovating the roof appeared to be necessary, as to connect the two separate buildings thus solving a leakage problem responsible for the cracking of the walls. Similarly, it was advised to rebuild the walls and the floors.



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Figure 3. Broken walls of Assella fistula center

Taking into account these recommendations we collected quotes from different bidders and finally chose *Adwa construction* to carry-out the planned as well as the additional (roof and broken walls) renovations.

Adwa construction quoted 15,000 USD to carry out these renovations. As the amount originally dedicated for refreshment works and equipment was of 10,000 USD, extra 5,000 USD is however is required and this will be covered from the left over money from the previous quarter. The construction company has already received 60% of the total agreement, which amounts to 9,353 USD, as an advance payment.

II. Upgrading of garden facilities

As to avoid destruction during the renovation activities, it was recommended to postpone the upgrading of the adjoining garden facilities (reinforcing the fencing, setting up benches in the garden as well as planting flowers) until renovation of fistula ward is completed.



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III. Provision of free obstetric fistula treatment

During the last three months, free obstetric fistula patient care services were provided to 25 additional patients at Assella fistula ward. Care services included surgical as well as medical obstetric fistula treatment, physiotherapy, and psychological and social support.

5,000 USD has been spent to treat of the 25 additional patients (200 USD per patient) as to cover their hospital stay and surgery cost, material, drugs (especially additional drugs not available in the Hospital's pharmacy) and other related supplies. Two senior fistula surgeons traveled on a rotating basis to Assella University Hospital and carried-out most of the reparative operations.

IV. Support of fistula care and training at Assella University Hospital

Equipment

So far only limited equipment for fistula care has been bought with the grant, 200 USD have been spent so far and thus less than originally foreseen. Additional expenditures will occur in the future.

Training

Extensive capacity building has been carried out by WAHA International's expert fistula surgeons who trained and supervised the local fistula team as well as expatriate obstetrician gynecologists and other surgeons who work at the fistula ward. As such, in the framework of this project, two expatriates and several local professionals (medical doctors, General Practitioners, Obstetrician/Gynecologists, Surgeons and Nurses) benefitted from the trainings in fistula care. Basic refresher training in fistula surgery as well as advanced training was provided, leading to the improvement of the competences of the medical professionals to treat and provide care for fistula patients, including for more complicated cases.



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The two expatriate obstetrician/gynecologists who were trained by WAHA's fistula experts are also responsible for the preoperative and post operative care of the center's fistula patients. The two doctors were hired by WAHA as to provide support to the University hospital, both at the fistula center and in any other obstetrics /gynecology care and training programs.

Per Diem and accommodation costs of the above-mentioned obstetrician and gynecologists and fistula surgeons were covered by the project. 2,139 USD was used to this end during the three months.

V. Dedication of one nurse to the fistula ward

To ensure the continuous quality of fistula care, a senior nurse, who is the head nurse of the gynecology department, was allocated by the administration as a part-time staff (50%) to the fistula center and the other 50% in the gynecology ward. However, as the recommended nurse was on in-service training, she was not able to take the extra responsibility before accomplishing her on job training which lasted until June 30th 2013.

As of July first she will resume her clinical activity and take up her new responsibilities; top up salary will commence as of July first 2013.

VI. Re-integration of patients after surgery

Psychological counseling was provided preoperatively and post operatively for all fistula victims helped at the center as to help them overcome the trauma associated with obstetric fistula. In order to facilitate their reintegration process, all of the 25 patients treated were given new dresses from the donated clothes by Ethiopia Fund. Due to delay in the bank process, timely usage of the



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money for all treated cases was not possible. Hence, the budgeted 120 \$ per patient, a total of 3,000 US\$ is allocated to integrate the most abandoned patient of all treated during this quarter.

The poorest and the most vulnerable woman was selected for reintegration. The project has identified this young girl who had contracted obstetric fistula during her first delivery 2 years back, and who had consequently been rejected by both her husband and her parents. As she has been in a state of depression, with no social ties, nowhere to go and no plans for the future, the coordinator at Assella hospital has been put in charge of identifying income generating activities that would enable her to work within the perimeters of the hospital during the day (by, for instance, selling fruits and soft drinks to other patients) and attend school during the evening. Details on the progress of the reintegration activities will be reported in the next quarterly report, and the photo of the girl is shown below.



Figure 4. Fistula patient treated at Assella fistula center



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V. Free transport for women presenting for obstetric fistula operations

The project has covered all transportation costs for the women to reach the hospital for fistula surgery as well as for the return journey, 30 USD is given to each of the 25 patients as transportation support; thus a total of 750 USD.

VI. Community outreach for case identification

Sensitization activities supported by information, education and communication activities are being carried out as to inform the community about the availability of free treatment services at the WAHA fistula centers in Assella; as such, announcements encouraging women to come forward and seek free treatment are being made on the radio throughout the region in the local language, Afan-Oromo.

As financial barriers can prevent women from seeking care, the radio messages put emphasis on the fact that all transportation costs will be covered (round trip transportation for the patient as well as for one person accompanying the woman). This message is being transmitted twice a week, as of the last month of the quarter and the monthly cost for the transmissions is 173 USD.

VII. Obstetric fistula Prevention Measures

Similarly, community outreach activities were designed and carried out in collaboration with the regional and zonal health bureaus, community level actors such as health extension workers and other NGOs with the aim of improving maternal health outcomes in the region by educating the



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community about obstetric fistula and raising awareness on the importance to access maternal health services during pregnancy, delivery and postnatal period. A total of 1,148 USD was used for transportation and per-diem of the coordinator for these field activities.

In order to create improved awareness, the fistula coordinator located at Assella hospital traveled to the community and provided community education about the risk factors, the causes and the consequences of obstetric fistula, about prevention measures and about the availability of treatment services as to increase the uptake of antenatal and postnatal care and in particular skilled attendance at birth. These outreach activities play an instrumental role in the project as they prevent occurrence of new cases by overcoming misconceptions associated with obstetric fistula.

Please refer to the following page for a detailed expenditure overview:

Expenditure overview (April 2013- June 2013)

Supporting fistula treatment, training and prevention at the Assela School of Health, Adama, Ethiopia				
Item	Description	Original Budget	Expenditure as of 06/30/2013	Remarks
Refreshment works and equipment of fistula ward	Painting, furnishing (curtains, bedsheets, etc) and renovation (roof and walls) of fistula ward	10000	9353	Renovations are underway, payment is in different phases
Upgrading of garden facilities	Setting up benches and planting flowers	3,000	0	Garden works will follow the renovations
Fistula treatment	Hospital stay and surgery costs, materials,	3750	5,000	



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	drugs and supplies - per case			
Equipment to increase fistula treatment capacity	Fistula surgery sets and consumables that need to be imported	1,250	200	
Fistula Surgeons for treatment and training	Indemnities including travel costs and per diem - per month	3,000	2,139	
Dedication of one nurse to fistula ward	Top up to nurses salary - per month	225	0	
Reintegration after fistula surgery	Includes psychological support and skills training and new clothes- per case	2250	0	3000 is allocated for the poor and neglected young girl
Transport patients	For fistula patients before and after surgery - per case	562.5	750	
Community outreach for case identification and fistula prevention measures	Radio announcements Community education to increase skilled attendance at birth	3150	1321	
TOTAL		Total Budget	Total Grant Expenditure as of 06/30/2013	
		\$ 27,187.50	\$ 18,763.00	



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		Total received is 28 000 \$. The 27 187,50 \$ refers to the planned quarterly budget. The remaining 812,50 USD will be budgeted for activities of the next quarter.	At the end of the first quarter, unexpended funds amount to 8424,5 \$, however 3000 to be used for integration of the identified poor girl, but 5424.5\$.
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Outlook

We sincerely thank the Ethiopia Fund for its support in ensuring high quality obstetric fistula treatment and prevention measures at Assella Hospital, Ethiopia and hope that this initial collaboration will mark the start of an ongoing and fruitful collaboration.