

Final report for the Eagle Foundation – July 2018

Operating theatre equipment to treat women with fistula at a new maternity and fistula unit in Arusha, Tanzania [File form: 00421/18](#)

We are so grateful to the Eagle Foundation for generously supporting our Tanzanian local partner, Maternity Africa, to establish fistula surgical services at their new, 52-bed maternity hospital – Kivulini – in Arusha.

By way of background, IMPACT has been working in partnership with Maternity Africa to improve maternal health outcomes and prevent and treat fistula since 2012 and we are delighted to have supported their new hospital, which opened in June. Your grant has been used to equip the hospital's fistula operating theatre and we can report that the first surgical camp has already taken place.

We have every confidence that in time Kivulini will fulfill its ambition to become a centre of excellence in maternal health care and fistula repair, and make a significant contribution towards improving maternal health outcomes for women living in Tanzania by training midwives from all over the country.

The report below has been prepared by Midwife Anna McKee, who has been instrumental in planning and project managing the new hospital.

Situation report: We are so delighted to have opened the doors of Kivulini and have heard the beautiful sound of the first baby cry. And at the opening ceremony on 9th June 2018, we were honoured to have the Honourable Deputy Minister of Health, Dr. Faustine Ndugulile, officially open the centre.

Our beautiful fistula patients sang at the opening ceremony too:

*'Women do not fear
Fistula can be treated
Men do not divorce us
Fistula can be treated
Community do not shun us
Fistula can be treated'*



Kivulini - Maternity Africa's new maternity and fistula hospital in Arusha

We are currently undertaking local outreach trips with our midwives to educate the local communities that surround the Hospital in the importance of accessing maternity care during pregnancy and birth. This is a two-tier approach targeting community leaders and the women who we are encouraging to seek our services. We are educating them about safe birth and how

to access our services. It is a challenge in the beginning to ensure that we reach those women most in need – the poorest women in society in need of free care. This is why it is important that men and village elders also hear the message so that they understand why it is crucial for women to come to a health care facility to deliver. We anticipate patient numbers will start slowly whilst our reputation builds and women hear from others about their experience at Kivulini.

It was a key part of our strategy to start the new hospital's services with a Fistula camp for many reasons. Fistula surgery is elective, meaning not an emergency, so it was a great opportunity to commence surgeries in a controlled manner, test staff skills and equipment and iron out many of the teething issues. Fistula has always been Maternity Africa's core business, and the very reason for building Kivulini, and training the Midwives is to prevent fistula from occurring in the first place.

The added bonus was to have Dr. Andrew Browning back on his first visit to Kivulini since his return to Australia in December of last year. He was impressed with the completion of the building (much bigger than he thought!) and said the operating theatre was the best he has worked in in Africa. For this we are so grateful to our donors, the Eagle Foundation, who enabled us to purchase the operating tables, theatre lights and other equipment to make our dream a reality.



The new fistula operating theatre; Dr Andrew Browning at work and the recovery ward

In procuring the equipment, we were careful to bear sustainability in mind. So, for example, ensuring theatre tables are hydraulic in their lifting mechanism rather than electric (which are not so straightforward to fix). We were fortunate to have Dr. Johnathon Barnes and Anaesthetic registrar visit from the UK to assist our Nurse anaesthetists in the training and initial use of the new operating equipment. This was excellent training.

The first fistula camp last month was a huge success with 23 surgeries performed over six days. 12 women were completely dry, whilst 11 more complicated cases will need follow up or repeat surgeries at our next camp in August. Our aim is to build the hospital's capacity to treat 150 women with fistula each year.

Shirima is 21 and has had a fistula for two years, caused during the birth of her third child, who did not survive the traumatic obstructed labour. She had been married at aged 15, but when she started to leak urine her husband divorced her and her father would no longer speak to her. Her mother felt sorry for Shirima, but was powerless to help and thus, she is estranged from her family. After two unsuccessful operations at another centre she was referred to Kivulini for the first fistula camp. She was so delighted on discharge to be dry, and to be returning to her other two children. She has a small farm that she tends and doesn't intend to marry again.

Beatrice was very nervous when she arrived at Kivulini, being one of the first patients through the doors. We gathered patients together a week prior to the fistula camp to check that patients were in good health for their operation. Beatrice was married at 17, but after two days in labour with her first child she delivered a stillborn baby. Two days later she began to leak urine uncontrollably. Her husband thought that this was very strange, coupled with the fact that it took Beatrice two years to become pregnant, he left her and married again. Scrapping together a living has been very difficult for Beatrice without the support of a husband. She has two uncles who occasionally support her. Although Beatrice's condition has improved after her operation she will come back in August. However she left with many new friends and is not afraid to return.



Dr Andrew Browning with the fistula patients he treated at Kivulini's first fistula camp

Expenditure statement

Item	Budget (£)	Expenditure (£)
Hydraulic operating tables x2	6,598	6,598
Surgical head torches x2	1,099	1,099
Free standing LED operating theatre lights x2	1,539	1,539
Autoclaves x2	3,748	3,748
Sub-total	12,984	12,984
Local taxes (18%)	2,337	2,337
Project management @ 5%	649	649
TOTAL	15,970	15,970

Exchange rate based on 1 GBP = 1.3 USD (18.05.17)