USAID’S FISTULA CARE 
AND PREVENTION WORK

More than 2 million women in sub-Saharan Africa and Asia are estimated to be living with fistula and an estimated 30,000 to 100,000 new cases develop annually. Yet the condition is almost entirely preventable, and its continuance is a sign of inequality for the world’s most vulnerable women and girls.

WHAT IS OBSTETRIC FISTULA?
Obstetric fistula, a hole that develops between the birth canal and one or more of a woman’s internal organs, is caused by obstructed labor without access to timely and skilled medical care, such as cesarean section.

Women with fistula are often among the most impoverished and vulnerable members of society. In addition to being chronically incontinent, women living with fistula are often abandoned or neglected by their husbands and families, unable to work, and ostracized by their communities. Women who develop obstetric fistula usually have had a stillbirth and must also endure the loss of a baby.

USAID’S RESPONSE
USAID’s fistula programs focus on the treatment of women with obstetric fistula, as well as prevention and social reintegration. Through our fistula projects, USAID makes grants to health facilities and other providers that offer dedicated fistula repair services in high-burden countries in sub-Saharan Africa and South Asia.

Additional USAID fistula prevention and support efforts include:
- Partnering with ministries of health, 17 faith-based organizations in 4 countries, nongovernmental organizations, and other local and international collaborators to set up operating rooms; train surgical teams; deliver medical equipment; and establish policies, standards, guidelines, training tools, and monitoring systems.
- Advocating for policy changes to tackle the root causes of fistula, including early marriage and poor access to voluntary family planning and emergency obstetric care.
- Implementing local solutions to raise community awareness about fistula prevention and treatment and to reduce maternal morbidity and mortality.
USAID’S INVESTMENT AND IMPACT

Since 2004, USAID has provided support to fistula services in sub-Saharan Africa and South Asia through three global projects: ACQUIRE Project (2004-2007), Fistula Care Project (2007-2013) and Fistula Care Plus (2013-2021), as well as through bilateral programs in 16 countries. In that time, the U.S. Congress has directed over $148 million to USAID for fistula projects.

Through this investment, USAID has supported more than 54,000 fistula repairs, provided more than 1.5 million family planning counseling sessions, improved 100 health facilities, implemented country programs, and trained thousands of medical personnel and volunteers, including more than 300 surgeons, in fistula repair.

Fistula research supported by USAID has resulted in:

• Uncovering the significant occurrence of iatrogenic fistula—fistula caused unintentionally by a health care provider—from caesarean section or hysterectomy
• Introducing non-surgical repair for simple fistula that is now being used with 4% of our clients, thus increasing access to safer care
• Providing evidence that 7-day catheterization following fistula repair surgery is effective and safe in comparison with longer catheterization, allowing for shorter hospitalizations and decreased cost to families and the health care system

Through close partnerships with national governments, USAID advocates for increased health system investments in fistula prevention and repair, which promote host country ownership of fistula prevention and support for fistula survivors.

As a result of USAID’s partnerships with local and national governments:

• In 2017, Nigeria’s Ministry of Health mandated free fistula repair surgeries nationwide and waived associated laboratory fees for all clients at tertiary hospitals.
• Hoima Hospital, a public hospital funded by Uganda’s Ministry of Health that serves more than 2 million people across five districts, pioneered the implementation of Uganda’s mentoring and coaching strategy for fistula surgeons, which will improve the hospital’s ability to diagnose and treat fistula.
• In 2017, USAID launched the campaign, “School Girls for Fistula-Free Bangladesh,” which has reached thousands of teenage girls in rural schools. Enrolled students learn about fistula prevention, antenatal care, and fistula repair, earning recognition as fistula champions in their communities.

LEARN MORE:

On header photo, Claudine Mukabatsinda is a fistula survivor who received repair surgery at a USAID-supported facility in Rwanda. After the surgery, new opportunities opened up for her: “Now, I have started my business. I have a tea shop, and everything is going very well,” she says.