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STRENGTHENING FISTULA SERVICES AT KEBBI VVF CENTER: THE JOURNEY SO FAR

a presentation by

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April 14th, 2008



BRIEF HISTORY

- Started as a unit of Obgyn Department of the state Specialist Hospital, in 1991
- Fistula Center initiated by 1st lady of the state in 1992 and commissioned as full pledged center in 1995.
- NCWS and GHON sponsored training of a fistula surgeon and 4 trained nurses in fistula management at the initial stage.



Early Challenges

- Huge backlog of VVF clients
- Lacked sustainability: due to frequent change in Government and policies
- Poor motivation leading to non commitment
- Inadequate manpower
- Poor funding mechanism
- Poor data management



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Early interventions

- In 1992, the 1st lady of the state took special interest in fistula, enhanced better management and improved funding.
- Tulsi Chanrai Foundation supported with equipments, consumables and improved nutrition
- UNFPA trained a doctor and nurses and supplied some equipments during the fortnight campaign.
- Dr. Kees has been visiting the Center to provide expertise and reduce backlog



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ACQUIRE INTERVENTION

- Holistic approach covering fistula prevention, repair and rehabilitation with social reintegration of clients.
- Cross cutting issues such as advocacy, capacity building, family planning and research.
- Community involvement to ensure sustainability.
- Data management training .



Fistula repairs

- Regular repairs
- Pooled effort fistula repairs (done twice)
- Standardized pre and post operative management
- Effective follow up schedules



Capacity Building

- ACQUIRE sponsored my training as trainer in fistula surgery with Dr. Kees Waaldjik
- Subsequently, 4 doctors and 2 nurses have undergone initial training in fistula surgery and management
- Kebbi VVF Hospital to be developed as a training site in VVF surgery.



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Infection Prevention

Purpose: Decrease hospital infection to barest minimum and improve quality of repairs.

ACQUIRE trained 2 trainers in infection prevention and additional 3 in general IP

Step down training done locally with support from hospital management.



Fistula & Family Planning Counseling Training

Purpose: To help the client to make an informed decision and improve quality of service

ACQUIRE trained 4 trainers in fistula counseling and many others on family planning counseling.

Step down training on Fistula counseling is planned.

Gaps/Challenges

- Rehabilitation and skill acquisition facilities
- Substandard laboratory
- Inadequate and improper mixing of nursing staff
- Sustained supply of consumables
- Record keeping

Other challenges

- Measures to prevent fistula still ineffective
- Community awareness needs improvement as FGM practices like Gishiri/Gurya cut are still happening.
- Manpower inadequate at the grassroots level
- Most State Governments still do not provide free maternal services.
- Poverty.