Addressing Fistula in Uganda
Stories of Survival and Hope

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Mary
Mary had been living with fistula for 10 years. Unlike many other women living with fistula, Mary’s husband accepted the condition and remained with her. However, others in her community isolated her; she didn’t feel comfortable with them, so she stayed at home and stopped attending social functions. “I felt like I was leaking all the time,” she recalled. “I tried not to drink anything.”

She had been told that “no one could heal the disease.” Then one day, she heard over the radio that repair services were available at Kitovu Mission Hospital. So, in April 2006, Mary traveled from her home in Rakai, which is near Tanzania, to Kitovu. There, a team of eight providers (including doctors, nurses, and an anesthetist) from Kagando and Kisiizi hospitals in Kasese district were participating in a three-week fistula repair and training session sponsored by EngenderHealth and the ACQUIRE Project. During this training, which was designed to build the providers’ skills and enable them to provide and support fistula services in their own facilities, Mary’s fistula was successfully repaired.

Mary is now ecstatic. For the first time in years, she can stand to look at herself in the mirror. “I can go out, smile, see friends, do work, and participate in any function. Now I can do work so well—I sew and knits mats, and do a little bit of digging.” She also shared suggestions for other women so that they don’t suffer the same fate that she did: “Don’t get pregnant at an early age. Don’t deliver in the village at home—go early to health center when you’re about to deliver.”

In August, Mary returned to Kitovu Mission Hospital for a follow-up visit, with a chicken as a gift of her gratitude to the hospital staff. At that visit, she thanked the facility staff profusely for providing such good treatment and care and for giving her a new life. As a final request, she made a plea to donors to “continue helping women with fistula.”

Kabalebe
Twenty-eight-year-old Kabalebe, from Tanzania, has lived with fistula for the last two years. Sadly, her husband died while she was pregnant, after which her in-laws took away and sold her property. Although her husband had taken her by bicycle for antenatal care visits during the second trimester of her pregnancy, once her husband died she was unable to attend these visits and she delivered in her village. After an extremely difficult four-day labor, Kabalebe had a stillbirth and developed combined vesico-vaginal and recto-vaginal fistula. An orphan with nowhere else to turn, Kabalebe sought shelter with a second cousin. Luckily, when her cousin saw that Kabalebe’s condition was worsening, he sold her father’s land to get money for her transport to a hospital.

Kabalebe first sought treatment for her condition at a hospital near her home in Isingiru, Tanzania. Unfortunately, the doctor there told her he was unable to repair her complicated fistula and advised her to
return the following year. However, Kabalebe had heard rumors about the availability of repair services in Uganda. In February 2006, she had scraped together the funds to travel the 12 hours to Mbarara, where she stayed until April, when a fistula repair session was scheduled at Kitovu Mission Hospital.

In April, Kabalebe’s recto-vaginal fistula was repaired, so she no longer leaks feces, and the urine leaking from the vesico-vaginal fistula has been stopped by means of a Mainz Pouch. Although the pouch is sometimes uncomfortable, she no longer experiences the embarrassment of leaking urine, and she has finally regained her strength. As she recovers, Kabalebe is now excited about making plans for her future. She hopes that she will be able to remain in Uganda and work to make money, and then eventually will settle again in Tanzania.

Dorotia

Dorotia has lived with fistula for the last six years. By the time she was 18 years old, she had already delivered three healthy children. For her fourth delivery, she went to a small clinic in her village. But after prolonged labor lasting three days, the baby died, and she began leaking urine.

Dorotia’s husband left her after she developed the fistula. By padding herself, she was able to do some digging work to earn money, but she was segregated from the rest of her community in the village. Unaware that her condition could be cured, it wasn’t until she heard about Kitovu Mission Hospital on the radio that she came to seek repair services.

For a long time, Dorotia has felt like she doesn’t fit in and has been embarrassed by the discharge of fluids. While awaiting surgery at Kitovu Mission Hospital in August 2006, she was enthusiastic that “I will tell people at home about services at Kitovu so that others will know that help is available.”

Juliet

Nineteen-year-old Julliet has been leaking from fistula for the last four years. “When I was giving birth, I delayed in labor and was too late to the hospital,” she recalls. “The baby died…and the problem began after that.”

Her husband left her, and Julliet now stays with her mother. But she has no friends that help. At one time she worked as a maid in town, but she experienced abuse for smelling and was forced to return home to her mother.

After hearing that repair services were available at Kitovu Mission Hospital, Julliet made the six-hour trip from Mityana. Because her fistula was complicated, she continued to leak after the catheter was removed following her first operation. She was informed that she should return to Kitovu for a second surgery, which she was awaiting on the day this photo was taken. Julliet remains hopeful, since she has seen many fistula cases that have been healed. She also shared advice for other women, so they don’t experience the same predicament: “Go to the hospital early, and use family planning!”

Photo credit: Alice Zheng